



**CMIPS II**  
**REQUEST FOR PROPOSAL**  
**HHSDC 4130-141A**  
**Addendum 56**

**Section 6**  
**TECHNICAL REQUIREMENTS –**  
**System Requirements Specification**  
**(SYRS)**

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## **1 INTRODUCTION**

This Section 6, TECHNICAL REQUIREMENTS - System Requirements Specification (SyRS), hereinafter referred to as SyRS defines the technical requirements for the Case Management, Information and Payrolling System, to be known as CMIPS II, that supports the Personal Care Services Program/In-Home Supportive Services (IHSS) Plus Waiver/IHSS-R (PCSP/IPW/IHSS-R) and Waiver Personal Care Services (WPCS) programs. The Contractor develops and maintains CMIPS II to meet the technical requirements defined in this Request for Proposal (RFP). The primary focus of CMIPS II is to replace the existing Case Management, Information and Payrolling System (Legacy CMIPS System) with a core system that continues to provide the same functionality but is enhanced to meet the requirements of new legislation and policy. In addition CMIPS II will be interfaced with the California Medicaid Management Information System (CA-MMIS) as the subsystem to process the payroll claims for the PCSP/IPW/WPCS services and to manage the enrollment for the PCSP/IPW/WPCS providers.

Bidders may take advantage of innovations in Information Technology (IT) that have occurred since the design and implementation of the Legacy CMIPS System. These technical innovations include, but are not limited to, the following:

- Intelligent Workstations
- Graphical User Interfaces (GUI)
- Local and Wide Area Network (LAN and WAN) technologies
- Relational Data Base Management Systems (RDBMS)
- Object Oriented technologies
- Development Productivity Tools
- Web Technologies
- Security Technologies

Once CMIPS II is operational, the system is to be routinely updated to meet daily business requirements as specified in Section 6, TECHNICAL REQUIREMENTS - Statement of Work (SOW), hereinafter referred to as Section 6, SOW, Paragraph 4.3, System Maintenance and Enhancements.

## **2 SECTION OVERVIEW**

This SyRS contains the technical requirements pertaining to the proposed system as described in Section 4, PROPOSED SYSTEM. The SyRS is the basis for all subsequent system documentation, including the General System Design, Detailed System Specification, Test Plans, and Test Procedures. The SyRS is a living document; as a result, the State updates this SyRS to reflect significant changes to CMIPS II requirements throughout the system life cycle.

Paragraph 4, Assumptions and Dependencies, lists the assumptions and dependencies affecting CMIPS II design, development, or implementation. Paragraph 5, Design and Implementation Constraints, lists the system constraints that are to be taken into consideration during CMIPS II design, development, and implementation. Paragraph 6, User Organizations, describes projected CMIPS II users and workload characteristics. Paragraph 7, Operating Environment/Architecture,

describes the physical environment for CMIPS II including hardware, software, County infrastructure, networks, and user interfaces. Paragraph 8, System Administration, describes the CMIPS II administration and security requirements. Paragraph 9, System Performance, describes the CMIPS II performance requirements, including system availability and required response times. The remaining paragraphs describe the system requirements by business function.

### **3 REFERENCE DOCUMENTS**

All documents referenced in this Section can be found in Appendix B, List of Bidder Reference Materials and Internet Links. Appendix B contains a full listing of all reference documents found in the Bidder's Library in Sacramento. Appendix B also contains hyperlinks to documents available through the Internet.

### **4 ASSUMPTIONS AND DEPENDENCIES**

The following are assumptions and dependencies that are assumed to be true for purposes of CMIPS II design, development, and implementation:

- All Counties purchase, install, and maintain desktop computers, printers, and networks that meet the minimum system requirements stated by the Contractor for the proposed system.
- Each County is responsible for supporting the infrastructure hardware and software within the County, except for the forms architecture.
- Each County supports its own intra-county network as defined in Paragraph 7.3.2, Local Area Network (LAN).
- All Counties are responsible for supporting either Microsoft Internet Explorer version 5.5 or higher or Firefox version 1.0 or higher.
- All County PCSP/IPW/IHSS-R offices are to be successfully connected to the [Department of Technology Services \(DTS\) Health and Human Services Agency Data Center \(HHSDC\)](#) Wide Area Network (WAN) in time to meet the CMIPS II implementation schedule defined in the Statewide Implementation Plan, as defined in Section 6, SOW, Paragraph 4.5.2, Statewide Implementation Planning. An exception to this is Counties that have facilities that, due to cost, connect to the system remotely over dialup lines or the Internet.
- To ensure all current business rules are identified and implemented in CMIPS II, the Contractor may have access to the Legacy CMIPS System code and documentation. Since some system documentation resides in the Incumbent Contractor's development tool, AllFusion, the Contractor may have access to AllFusion as needed to identify and validate all automated business rules.
- For services defined in Artifact 15A, State Data Center Statement of Work (DC SOW), State Data Center ~~is defined as either~~ [includes both the DTS Cannery Campus \(formerly known as State of California Health and Human Services Agency Data Center \(HHSDC\)\) and the DTS Gold Camp Campus \(formerly known as the Stephen P. Teale Data Center \(Teale\)\)](#), or any succeeding consolidated data center pursuant to Executive Order S-13-04.
- Network Services are defined as the Wide Area Network and the services associated with the installation, support and monitoring of the network, as defined in Artifact 15B, [HHSDC Network Services SOW](#), ~~using the State of California Health and Human Services Agency~~

~~Data Center or any successor agency resulting from the consolidation of the Health and Human Services Agency Data Center and the Stephen P. Teale Data Center pursuant to Executive Order S-13-04 signed by Governor Schwarzenegger on August 24, 2004.~~

- The system requirements reference the CDSS Manual of Policy and Procedures (MPP). Sometimes the State provides additional clarification to an MPP in an All County Letter (ACL) or All County Information Notice (ACIN). The CMIPS Project Office and CDSS have created a matrix mapping MPP's to known ACL/ACIN's to use as an internal tool to track information concerning MPP's. This matrix is available in the Bidder's Library; however, the State may issue new ACL/ACIN's so the list may not be current at all times. It is the responsibility of the Contractor to ensure they have the latest information available to interpret the referenced MPP's.
- The Contractor is not to use policy interpretations and fair hearing decisions without consulting with CDSS. Policy interpretations can become obsolete and fair hearing decisions made by judges external to CDSS may not be consistent with CDSS policy and procedures. These items will be available as needed during contract execution where they can be discussed and clarified for the Contractor by appropriate CDSS staff.

## 5 DESIGN AND IMPLEMENTATION CONSTRAINTS

The following are design and implementation constraints that are to be taken into consideration for purposes of CMIPS II design, development, and implementation:

- The scope of this Contract does not include providing personal computers, local area network hardware, or WAN/LAN router connections to the County offices; however, the CMIPS II design should maximize use of existing County equipment to minimize fiscal impact to the County budgets. A listing of County equipment can be found in Artifact 8 - County Desktop and User Information, located in the Bidder's Library.
- Although automation of timesheet data capture is a requirement, a constraint on the solution is that physical paper timesheets signed by both the Provider and Recipient have to be retained. Timesheets are to be stored by the Contractor after processing as defined in Section 6, SOW, Paragraph 4.6.3.7, Timesheet Processing.

~~Although Executive Order S-13-04 was signed on August 24, 2004 to consolidate the Health and Human Services Data Center and the Stephen P. Teale Data Center, the consolidation of services is not expected to be defined and complete in time for evaluation of CMIPS II Proposals; therefore, for purposes of this procurement, until such time as consolidation eliminates distinction between separate HHSDC and Teale facilities, HHSDC will serve as the single point of contact in working with each Bidder to facilitate determination of the data center services, whether obtained through the HHSDC or Teale facilities, best suited for supporting the Bidder's proposed solution. The State Data Center Services, encompassing both HHSDC and Teale DTS services at both the Cannery Campus and Gold Camp Campus are defined in Artifact 17, State Data Center Service Standards and Artifact 15A, State Data Center SOW.~~

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**Requirement(s)**

1. The CMIPS II design shall use the [HHSDCDTS](#) WAN for the services identified in Artifact 15B, Network Services SOW.
2. No CMIPS II production or test data with personal information shall be allowed outside the United States of America.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_ NO \_\_\_\_\_

## **6 USER ORGANIZATIONS**

Several different organizations need user access to CMIPS II. Each organization has a variety of user roles. These organizations, or classes of users, who have been identified as using the application and/or data, include the following:

- County Welfare Departments (CWD)
- California Department of Social Services (CDSS)
- Department of Health Services (DHS)
- Public Authorities (PA) or equivalent entities

Within each organization, individual users have varying roles and responsibilities, which are defined in Paragraph 8.1.1, Application Security Architecture. In addition, the user base requires several types of access to the application, including the following:

- Locally via the County/[HHSDCDTS](#) network
- Remotely via a direct dial telephone connection to the [HHSDCDTS](#) WAN
- Remotely via a secure Internet connection

### **6.1 County Welfare Departments (CWD)**

County Welfare Departments administer the PCSP/IPW/IHSS-R Program. Typically, each County is anticipated to have roles of Manager, Supervisor, Social Worker, Payroll Clerk, Fiscal/Accounting, and Administrative Support. Some Counties may also have roles of Nurse, Provider Coordinator, County Contract Coordinator, Homemaker, Homemaker Supervisor, Quality Assurance, and Fraud Investigator. The following definitions are examples of types of tasks and functionality within CMIPS II anticipated to be utilized by these roles:

- Managers receive CMIPS II System reports for Management Information functions and perform inquiries.
- Supervisors receive CMIPS II System reports for Management Information and Case Management functions, review and approve PCSP/IPW/IHSS-R cases, perform inquiries, and update cases as necessary.
- Social Workers (SW) assess Recipients' needs for PCSP/IPW/IHSS-R services, complete and review CMIPS II System forms, document case notes, update case records in the CMIPS II System, and receive reports, and perform inquiries.
- Payroll Clerks receive and review timesheets, enter and verify time for the Individual Providers, enter data from timesheets, perform inquiries, and enter special transactions.

- Fiscal/Accounting Clerks perform data entry duties for the CMIPS II System. They access CMIPS II for data entry, inquiries, and printing.
- Administrative Support positions may access the CMIPS II System for inquiries and printing. These positions include the following:
  - Clerical staff who direct requests for service, distribute reports and forms, and archive timesheets.
  - Departmental analysts who support managerial and administration staff with program/system statistics gathering and project support.
  - Technical support staff who provide computer support to PCSP/IPW/IHSS-R sites and workstations.
- Nurses may be utilized for the PCSP/IPW/IHSS-R needs assessment process or for documenting case notes.
- Provider Coordinators aid in referring Providers to Recipients.
- County Contract Coordinators support the payment process between the County and County Contractors.
- Homemakers provide PCSP/IPW/IHSS-R services to Recipients.
- Homemaker Supervisors schedule and approve service hours for Homemakers.
- County Quality Assurance staff conduct in-home visits with Recipients to validate the County's assessment of the need for PCSP/IPW/IHSS-R services and the quality of care received; they also provide technical assistance to the Counties.
- County Quality Assurance staff perform reviews of case information to ensure caseworkers appropriately apply PCSP/IPW/IHSS-R rules and policies.
- Fraud Investigators research instances of alleged PCSP/IPW/IHSS-R fraud.

## **6.2 California Department of Social Services (CDSS)**

The PCSP/IPW/IHSS-R Program is administered within the Adult Programs Branch (APB) of the Disability and Adult Programs Division (DAPD) of CDSS. The PCSP/IPW/IHSS-R Program is also supported by administrative services from other CDSS divisions. CDSS Adult Programs has roles of Systems, Fiscal and Administrative, Policy and Operations, Quality Assurance, Estimates, and Research and Development. In addition, the PCSP/IPW/IHSS-R Program is supported by CDSS Fiscal Services and Accounting Bureaus. These roles can be further described as follows:

- The Systems Unit oversees the CMIPS II Contract with support from [the ~~HHSDC~~OSI CMIPS Project Office](#). The Unit monitors the Contractor's efforts, manages changes to CMIPS II, supports tax processing, facilitates the implementation of approved wage increases, and provides customer service.
- The Fiscal and Administrative Unit verifies the calculations on several forms and invoices, reviews and approves Public Authority budgets and rates, maintains the funding source percentage structure between Federal, State and County shares of cost, performs calculations on the Public Authority Individual Provider Payment Billings, and verifies County Contractor rates.

- The Policy Development Unit researches the issues and risks associated with developing new policy or changing existing policies.
- The Operations and Technical Assistance Unit provides technical assistance to Counties through policy interpretations and County visits.
- The Quality Assurance Unit performs reviews of case information to ensure caseworkers appropriately apply PCSP/IPW/IHSS-R rules and policies.
- The Quality Assurance Unit conducts in-home visits with Recipients to validate the County's assessment of the need for PCSP/IPW/IHSS-R services and the quality of care received; they also provide technical assistance to the Counties.
- The Estimates Branch prepares cost projections for the budgets and develops caseload and dollar projections for the current and projected budget years.
- The Research and Development Division provides the Adult Programs management, staff, other State departments, the Counties, the media, universities, other outside researchers, legislature, and a variety of others with data for long-term program evaluation, policy planning, and outcome evaluation.
- CDSS Fiscal Services and Accounting Bureau prepares and authorizes the daily payroll claim schedule, receives and reviews expenditure reports and utilizes system data for budgetary tasks.

### **6.3 Department of Health Services In-Home Operations (IHO)**

DHS In-Home Operations staff authorize and pay Waiver Personal Care Services (WPCS) through CMIPS II for Recipients of Home and Community Based Services (HCBS) administered by IHO. IHO staff directly access CMIPS II to enter WPCS hours for Providers.

### **6.4 Public Authorities (PA)**

Public Authorities assist Recipients in finding Providers through a registry, investigate qualifications and background of Providers who are placed on their registry, establish a referral system, provide for training for Individual Providers and Recipients, manage Individual Provider benefits, ensure that the requirements of the personal care option of the California Code of Regulations are met, and perform other functions related to the delivery of PCSP/IPW/IHSS-R services.

To perform their duties, the PA may exchange Individual Provider and Recipient information with the County PCSP/IPW/IHSS-R offices. Counties may assign PA staff user roles for CMIPS II access. For example, many Counties use the Public Authority to enroll providers.

PAs may also offer Individual Providers benefits including health, vision and/or dental insurance. Benefits deduction information may be exchanged between CMIPS II and PA automated benefits management systems.

## **7 OPERATING ENVIRONMENT/ARCHITECTURE**

The goal of CMIPS II is to provide a stable and flexible foundation system that allows support of the PCSP/IPW/IHSS-R Program as it expands and changes. Use of packaged components and industry standard techniques and tools allows cost-effective development, implementation, and

operation. The State is seeking a modular system that supports reuse and upgrading of components as technologies and business requirements change.

Another goal of CMIPS II is to interface with the California Medicaid Management Information System (CA-MMIS) to provide better Medi-Cal benefits coordination and management. CMIPS II will provide efficient, economical, and effective support of the PCSP and waivers as a CA-MMIS subsystem that processes the payroll claims for the PCSP/IPW/WPCS services and manages the enrollment for the PCSP/IPW/WPCS providers.

An additional goal of CMIPS II is to use, to the greatest extent possible, the Information Technology (IT) infrastructure currently in place throughout the State. This infrastructure includes the existing County workstations and LANs and the statewide WAN supported by [HHSDCDTS](#).

It is envisioned that CMIPS II is to contain the core PCSP/IPW/IHSS-R functionality, which throughout its lifetime can be enhanced and extended to further improve the business process, customer service and user community productivity.

#### **Requirement(s)**

1. The developed system shall be based on industry standards and shall be delivered in such a manner that modules can be reused by different mechanisms or access methods, e.g., a timesheet could be entered manually or from an automated solution but could still use the same components of code (object) to add it to the database.
2. CMIPS II shall meet the requirements of applicable Federal and State laws and regulations.
3. The payroll requirements of the RFP shall be satisfied using an existing Commercial Off-the-Shelf (COTS) Human Resources/Payroll Package.
4. The CMIPS II design shall ensure the maintainability of the whole system integrated with a COTS product. The design of any customization to any COTS Human Resource/Payroll Package shall take into consideration and minimize the impact to upgrading the COTS Human Resource/Payroll Package.
5. The CMIPS II design shall consider the varying degrees of connectivity available to the County offices and ensure feasible and cost-effective connectivity for County offices including those at remote locations.
6. CMIPS II shall provide an architectural foundation to support the application over the life span of the Contract in terms of platform stability, scalability and configurability to remain current with technological advances without the need to replace the system.
7. CMIPS II shall be component-based and flexible in terms of adding capacity with minimum system downtime and reducing the impact to both users and the State. Resource capacities include Central Processing Unit (CPU), Memory, Disk storage, and Input/Output (I/O) throughput.
8. CMIPS II shall be documented in detail including any hardware, COTS software customization, security, production, and test configurations.
9. CMIPS II shall be required to comply with the Health Insurance Portability and Accountability Act (HIPAA) of 1996 to the extent and in the manner determined to be applicable by CDSS. The final rules for HIPAA can be found at <http://www.cms.gov/hipaa/hipaa2/default.asp> and address the following:

- a. Standards for Electronic Transactions.
  - b. Standards for Privacy of Individually Identifiable Health Information.
  - c. Standards for Security.
10. CMIPS II shall be required to comply with the proposed National Standard Employer Identifier rule when it is finalized, to the extent and in the manner determined to be applicable by CDSS.
- Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **7.1 Central System**

### **Requirement(s)**

1. All hardware and software shall have all specifications documented in detail including all system components, configurations, and peripheral equipment. Documentation shall include, but is not limited to, technical specifications, maintenance and operation procedures, and technical and user documentation.
2. The server hardware configuration shall be designed to meet or exceed the minimum requirements as defined in Paragraph 9, System Performance.
3. Server requirements shall include capacity in all core elements, including but not limited to CPU, memory, and disk space, to support the requirements in Paragraph 9, System Performance and the requirements defined in Section 6, SOW, Paragraph 4.4.3, Capacity Planning and Management.
4. All software, to the extent it is commercially available, shall be COTS or customized COTS products supported by the software manufacturer. Custom software that has to be newly developed is not a desirable solution unless there is no existing COTS or customized COTS software to support the specific application. All customization of such products or custom software development to augment their capabilities shall be performed in accordance with the requirements of the Contract resulting from this RFP.
5. All network communications shall be based on the Transmission Control Protocol/Internet Protocol (TCP/IP).
6. The operating system shall support at a minimum a C2 rating under the Trusted Computer System Evaluation Criteria published by the [NCSC](#) (5200.28-STD). DEPARTMENT OF DEFENSE, TRUSTED COMPUTER SYSTEM EVALUATION CRITERIA, DOD 5200.28-STD, published by the National Computer Security Center ([NCSC](#)) or its equivalent under the Common Criteria Evaluation and Validation Scheme (CCEVS).

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **7.1.1 Database Requirements**

#### **Requirement(s)**

1. A Relational Data Base Management System (RDBMS) shall be used as the data storage repository facility for the application data to be retained to operate CMIPS II.
2. The RDBMS shall include support for the following:
  - a. Row level locking
  - b. Replication

- c. Triggers
  - d. Constraints
  - e. Stored Procedures
  - f. Physical and Logical Partitioning
  - g. Transaction logging
  - h. Referential Integrity.
3. All system data elements shall be fully defined and described in a Data Dictionary.
  4. The RDBMS shall support extended data types such as binary images, audio, and video.
  5. In case of failure, the RDBMS shall recover to the last committed transaction.
  6. In case of failure, or the entry of incorrect data, the RDBMS shall recover to a specified point in time.
  7. The RDBMS shall support automated dynamic query optimization.
  8. The RDBMS shall have the functionality to allow maintenance and management operations to be performed while the application is active, e.g., backups, optimization, etc.
  9. The RDBMS shall have the security functionality to grant levels of access to single and/or groups of users to specific areas of the schema.
  10. The RDBMS shall have the functionality to perform internal automatic integrity and corruption monitoring, reporting and notification.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **7.1.2 Housing and Operating CMIPS II**

The State intends to operate CMIPS II internally at a State Data Center, pursuant to the State Administrative Manual ([SAM](#)), Section 4982.1 and Executive Order S-13-04 as signed by the Governor of the State of California.

#### **Requirement(s)**

1. To support the maintainability of CMIPS II, the system shall be designed to utilize the platforms supported at the State Data Center.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **7.1.3 Development Tool Requirements**

#### **Requirement(s)**

1. All development and associated support tools across CMIPS II including, at a minimum, the client, middleware, and server systems shall be clearly identified and their use in CMIPS II documented.
2. The development tools shall apply a modular approach to design and development such that software modules or objects can be reused and/or accessed via different methods (i.e., from different programs or objects).
3. The tools selected for CMIPS II development shall support an architecture and environment that are effective as platforms for development and shall produce a system that supports CMIPS II System Quality Attributes (SQA), as defined in Section 6, SOW, Paragraph 4.1.5, Architecture Design Specification (ADS).



4. All software components used to support development shall be identified including functional and technical specifications and reasons for use. Software component usage areas shall include the following at a minimum:
- a. Change Management
  - b. Configuration Management
  - c. Design
  - d. Data modeling
  - e. Transaction Analysis
  - f. Development
  - g. Testing and Test Management
  - h. Release Management
  - i. Capacity Planning and Simulation Modeling
  - j. System sizing
  - k. Requirements Management
  - l. Documentation Management.
- Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **7.1.4 System Management Tools**

##### **Requirement(s)**

1. To provide an effective management solution, all tools to be used in management and monitoring of CMIPS II shall be identified and have technical and functional descriptions with reasons for use. Tool usage areas shall include the following:
    - a. Application Performance monitoring
    - b. Report distribution
    - c. Interface management
    - d. Database monitoring and management
    - e. Middleware monitoring and management
    - f. Job scheduling.
  2. The management and monitoring tools shall integrate with current State Data Center operations management tools.
- Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **7.1.5 Issue Tracking System**

##### **Requirement(s)**

1. An automated issue tracking system shall be implemented. This system shall have the following functionality at a minimum:
  - a. Provide a repository for issues management and reporting
  - b. Categorize and prioritize issues
  - c. Assign issues to teams or specific people
  - d. Track the status of each issue and status date changes

- e. Maintain secure access and access levels to the Issue Tracking System at both the individual and group levels as authorized by State Project Manager
- f. Send notification of past due activities and issues with overdue resolutions
- g. Track issue metrics to support the monthly reporting requirements as defined in Section 6, SOW, Paragraph 4.4.9, Customer Service/Help Desk
- h. Record issue resolutions
- i. Track historical events/actions for issues.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **7.2 County Infrastructure**

The goal of the State is to maximize the ability for the Counties to use current infrastructures.

### **7.2.1 Workstation Configuration**

#### **Requirement(s)**

1. The Contractor shall specify the minimum requirements for the client workstation. The workstation shall be able, at a minimum, to support the concurrent activation of the following:
  - a. CMIPS II application
  - b. Email, Calendar and task management, currently Microsoft Office 2003.
2. Minimum client workstation requirements shall state the capacity in all core elements including CPU, memory, and disk space for at least three (3) years of client side application and caseload growth. Estimations of caseload growth can be found in Artifact 12 - CDSS Estimated Caseload Growth, located in the Bidder's Library.
3. All hardware shall be energy efficient and configured properly for automatic energy-saving features as per current ENERGY STAR specifications and shall be ENERGY STAR compliant. ENERGY STAR information can be found at <http://www.energystar.gov/>.
4. Workstations shall include, at a minimum, the following configuration:
  - a. 15" Monitor (.25mm dot pitch CRT, .3mm pixel pitch flat screen)
  - b. 104 key keyboard
  - c. 2 Button Mouse
  - d. 10/100 Mb Network Interface Card
  - e. 500Mhz CPU
  - f. 128 Mb RAM
  - g. Video Card
  - h. 20 Gb hard drive.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **7.2.2 Workstation Software**

In support of the State's goal to utilize the existing County infrastructure, there are several requirements to be considered regarding client software on workstations. The current de facto



standard for PC configurations in the Counties that could potentially access CMIPS II is the Microsoft Windows series for operating systems.

**Requirement(s)**

1. The client application shall be required to co-exist with 3270 emulation, which the users need to access Medi-Cal Eligibility Determination System (MEDS).
2. The client application shall be required to co-exist with the Statewide Automated Welfare System (SAWS) applications, which provide County Welfare Eligibility functionality. These applications are currently two (2) Powerbuilder client applications (Powerbuilder versions 5 and 7), one (1) Mapper based application using Futuresoft emulation, and one (1) thin-client web application.
3. To support compatibility with other applications on the client workstation, the client application shall have thin-client architecture.
4. The client software footprint components shall be documented including the size of each component to be distributed to client workstations.
5. CMIPS II shall support the current operating system of Microsoft Windows within the timeframe defined in Section 6, SOW, Paragraph 5.7.3, Software Maintenance. CMIPS II shall allow backward compatibility of the client application software for the current and one previous major version of the client workstation operating system. Details of current and prior versions of Microsoft operating systems can be found at <http://www.microsoft.com/>.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

**7.2.3 Workstation Software Distribution**

It is a goal of CMIPS II to provide an efficient and effective way to configure, distribute, and maintain workstation software with minimum impact to existing County processes. It is the intent of Counties to test workstation software in a controlled manner prior to distributing to users in order to ensure compatibility with other workstation components. It is also the intent of most Counties to control and distribute client software to the desktop; however, some Counties may prefer automatic updates.

**Requirement(s)**

1. For both initial installation as well as subsequent releases, CMIPS II shall provide the following:
  - a. Allow authorized users to securely download workstation software to a designated workstation or server
  - b. Allow Counties to request that client software be automatically distributed to the workstation without the need for user intervention
2. CMIPS II shall make workstation software available to Counties with sufficient lead time for Counties to test workstation software prior to production release.
3. CMIPS II shall provide workstation software documentation, including but not limited to changes to application functionality, installation instructions, and software version number.
4. CMIPS II shall ensure workstation software is distributed in a time-efficient way that also minimizes impact on network traffic.

5. CMIPS II shall ensure that a client workstation has the correct version of all application components and if not, shall notify the user.
- a. For Counties that request automatic updates for client software, CMIPS II shall require the user to either select the automatic upgrade of the client application or exit the application.
  - b. For Counties that do not allow automatic updates at the user request, CMIPS II shall notify the user that the CMIPS application is not the correct version and they need to contact their local system administrator; and, in that case, the user will be exited from the application.
- Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **7.2.4 Printers**

### **Requirement(s)**

1. All PCSP/IPW/IHSS-R CMIPS II printers shall support the following at a minimum:
  - a. Black letter quality print
  - b. Grayscale image printing
  - c. A rating by the manufacturer for volume of not less than 60,000 pages per month
  - d. Resolution of not less than 600 dpi
  - e. Generation of the format and content of all PCSP/IPW/IHSS-R CMIPS forms including letterheads, signatures, graphic, and County header information
  - f. Capability for printing large print (Arial 18 point) for the visually impaired
  - g. Speed of no less than fifteen (15) pages per minute
  - h. Network interface
  - i. TCP/IP connectivity and Novell SPX/IPX support
  - j. The following standard document types – PCL, Adobe, and Postscript – and the proposed forms generation software
  - k. The requirements defined in Paragraph 7.8, Forms Architecture, and Paragraph 16, Forms
  - l. Sufficient input trays to support both "letter" (8.5" x 11") and "legal" (8.5" x 14") size paper
  - m. An operational speed and capacity sufficient to complete printing of all overnight forms and reports (except online initiated reports) before 6:00 AM the next day
  - n. Sufficient input and output tray capacity to print all regularly scheduled overnight forms and reports (except online initiated reports) unattended
  - o. Duplex printing
  - p. Printing of U.S.P.S. address bar codes.
2. All hardware shall be energy efficient and configured properly for automatic energy-saving features as per current ENERGY STAR specifications and shall be ENERGY STAR compliant. ENERGY STAR information can be found at <http://www.energystar.gov/>.

3. The Contractor shall ensure that PCSP/IPW/IHSS-R CMIPS II printers are stable and operate to meet or exceed the requirement of 98 percent availability twenty-four (24) hours a day, seven (7) days a week, three hundred sixty-five (365) days a year.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### 7.3 Communication Network

The network infrastructure is to be implemented and supported by the individual State and County entities, not the Contractor. ~~HHSDC~~DTs supports the internal backbone and connectivity to the County. Each County supports the network infrastructure within their County. Some County sites may elect to connect to the application over the Extranet (e.g. over a VPN service).

#### 7.3.1 Wide Area Network (WAN)

##### Requirement(s)

1. CMIPS II shall utilize the statewide WAN supported by ~~HHSDC~~DTs. This network provides connectivity between the State Data Center and at least one State Point of Presence (POP) router in each County. Connectivity within the County from the POP is the responsibility of the individual County.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### 7.3.2 Local Area Network (LAN)

##### Requirement(s)

1. CMIPS II shall use, where available, the existing County internal communications architectures. Implementation and support of the LAN in each County, including any intra-county WAN links, are the responsibility of the individual Counties.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### 7.3.3 Remote Access

It is anticipated that the majority of users access the application via the County networks and ~~HHSDC~~DTs WAN. However some mobile users and users in remote offices not connected via this network require access to CMIPS II.

##### Requirement(s)

1. CMIPS II shall support user access using both dial-up and secure Internet connection services supported by ~~HHSDC~~DTs.
2. CMIPS II shall not preclude the use of Virtual Private Network (VPN) technology.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### 7.4 Development and Test Systems

##### Requirement(s)

1. The Contractor shall specify all hardware and software used in the software development lifecycle. Hardware and software shall include but are not limited to all servers, workstations,

printers and LAN. The requirements for purchase and maintenance of the development and test hardware and software can be found in Section 6, SOW, Paragraph 5.7, Hardware and Software.

2. Any CMIPS II functionality that is introduced into the production system shall be tested.
3. At a minimum, one (1) test system shall reside with the production server at the State Data Center under the same configuration management process as the production server. This server shall be used for testing application compatibility, OS upgrades, database upgrades, hardware changes, and interface modifications.
4. The development and test systems shall enable software development and support specific development and test system requirements defined in Paragraph 9, System Performance.
5. Development and test systems shall support compliance with Federal and State laws for data confidentiality, privacy, and disclosure including the HIPAA regulations stated in Section 5.2 Welfare and Institutions Code (W&IC) §10850 Confidentiality of Individual Data, California Civil Code §1798.24 et seq., Confidentiality and Disclosure of Personal Information.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **7.5 User Interface**

### **Requirement(s)**

1. A user-friendly color Graphical User Interface (GUI) shall be required for presentation of CMIPS II to users. The GUI shall be consistent throughout CMIPS II.
2. The GUI shall support common features, such as pointing device support, pop-up windows, drop down lists and short-cut keys.
3. CMIPS II shall validate and cross-validate to the greatest extent possible each field as it is exited. If, upon exiting a field, validation or cross-validation cannot be performed, CMIPS II shall perform those activities when enough data is available. CMIPS II shall re-execute validations and cross validations when changes occur to data that may impact the field. CMIPS II shall immediately provide screen error messages and context-sensitive help for all failed validations.
4. This validation function shall provide two levels of detail. The first level shall identify the incorrect action(s) and general solution. The second level of context-sensitive error and diagnostic messages shall provide the user the option of looking at related subjects by, for example, opening the user manual at the relevant section.
5. CMIPS II shall carry pertinent data from screen to screen as well as use default values when appropriate. CMIPS II shall be required to access the database or memory for information rather than require reentry of information already in the database.
6. CMIPS II shall provide an automated mechanism (e.g., a “copy/paste” function) for a user to transfer data to and from the application to other industry standard office products, including the Microsoft Office suite and Lotus Notes Suite.
7. All error messages and context sensitive help shall have correct spelling and grammar in U.S. English and have a Flesch Reading Ease score of at least 70.
8. All error messages and context sensitive help shall be consistent in: screen location, font, color, format, text case, and style.

9. All error messages and context sensitive help presented to the user shall be non-technical and phrased as simply as possible to aid the user in identifying the problem. In addition to all other State approvals, all error messages are subject to State approval.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **7.6 Help Sub-System**

### **Requirement(s)**

1. CMIPS II shall provide a comprehensive context-sensitive help subsystem that can be accessed both from the function in question and independently from a menu.
2. The help subsystem shall provide a Table of Contents, multiple index levels, and full text search.
3. The help subsystem shall provide cross reference and online access to PCSP/IPW/IHSS-R regulations, PCSP/IPW/IHSS-R policy and procedures by issue, the W&IC and Code of California Regulations (CCR) sections related to PCSP, IPW, IHSS Residual, and the PCSP/IPW/IHSS-R CMIPS User's Manual. The help subsystem shall utilize hyperlinks to other documents and intranet/internet websites where available.
4. The help subsystem shall have correct spelling and grammar in U.S. English, and shall be consistent in font, color, format, text case, and style.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **7.7 Exception Handling**

Exception handling is comprised of the automated processes CMIPS II supports to handle system exceptions, other than those business validation errors that are passed back to the user. The goals for exception handling in CMIPS II are as follows:

- To provide effective and consistent communication with the helpdesk and technical support staff
- To support an effective and responsive exception handling and resolution process.

### **7.7.1 Online Exception Handling**

#### **Requirement(s)**

1. CMIPS II shall provide a solution for logging, reporting and accessing exceptions. Each exception logged shall include, at a minimum, the following information in U.S. English:
  - a. Username
  - b. Date/Time
  - c. Error text sent back to the user
  - d. System Error Code
  - e. System Error Message
  - f. Database table(s) or file(s) being accessed where database interaction is involved
  - g. Database or file access key(s), where database interaction is involved, to identify potential database issues
  - h. Source Code Module in which the exception occurred

- i. Identification as to which function within the module was being executed.
2. In addition, exceptions on the client, server and middleware platforms involved in any business transaction shall be centrally located.
3. CMIPS II exceptions shall be retained until the defect is corrected and released into production.
4. CMIPS II shall have the functionality to support sending automatic notifications of online exceptions to individuals and/or groups.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **7.7.2 Batch Exception Handling**

#### **Requirement(s)**

1. CMIPS II shall have the functionality to support logging, reporting, and accessing exceptions that occur during batch processing. Each exception logged shall include, at a minimum, the following information in a U.S. English format:
  - a. Username
  - b. Date/Time
  - c. System Error Code
  - d. System Error Message
  - e. Database table(s) or file(s) being accessed
  - f. Database or file access key(s), where database interaction is involved, to identify potential database issues
  - g. Source Code Module in which exception occurred
  - h. Identification as to which function within the module was being executed
  - i. Batch job name.
2. CMIPS II batch processes shall integrate with the job scheduler to halt further processing when necessary and shall prevent any dependent processes from being executed.
3. Restart capability of the batch processing shall be supported, including the need to synchronize database and files outside of the database management system.
4. Batch processing exception handling shall include notification to an operator or support technician of the failure.
5. In addition, batch-processing exceptions on the client, server and middleware platforms shall be logged in a central location.
6. CMIPS II exceptions shall be retained until the defect is corrected and released into production.
7. CMIPS II shall have the functionality to support sending automatic notifications of batch exceptions to individuals and/or groups.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## 7.8 Forms Architecture

### Requirement(s)

1. CMIPS II shall print all information contained in Notices of Action on a single sheet of paper except those printed in large font for the visually impaired.
2. When printing multiple copies, CMIPS II shall identify how each copy is distributed, e.g., File, Recipient.
3. CMIPS II shall allow production of a set of forms that are pre-populated with known data and printed on demand or overnight.
4. CMIPS II shall merge data into forms templates.
5. CMIPS II shall automatically trigger generation of specific forms to the County office when they are required by the business requirement, e.g., Notice of Action.
6. CMIPS II shall print County specific static information and/or signatures on certain forms as required by the County.
7. CMIPS II shall minimize forms traffic over the WAN.
8. All reports and forms shall be printed on plain paper that is letter or legal size.
9. CMIPS II shall allow a user to retrieve a blank template and fill it in at the workstation before printing it, on demand.
10. CMIPS II shall support printing alternate language for forms on all printers, as defined in Paragraph 7.8.1, Language Support.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_ NO \_\_\_\_\_

### 7.8.1 Language Support

Currently, CDSS has translations of various forms from a number of programs in 21 languages: Arabic, Armenian, Chinese, English, Farsi, Hebrew, Hmong, Illocano, Italian, Japanese, Korean, Lao, Polish, Portuguese, Russian, Samoan, Spanish, Tagalog, Thai, Turkish, and Vietnamese. This list of languages supported by CDSS changes as the demographics of the California population change. CDSS will keep the Contractor informed of the currently supported languages for forms throughout the Contract life cycle through System Service Requests using the Change Management process in 3.2.5, Change Management.

### Requirement(s)

1. CMIPS II shall have the functionality to support generation of a state-approved form in languages other than U.S. English as approved by the State Project Manager. CMIPS II is not required to provide dynamic language support for languages other than U.S. English.
2. CMIPS II shall support the use of static Notices of Action (NOA) and State-approved forms text as translated and approved by CDSS.
3. CMIPS II shall have the functionality to support the merging of generated language-supported NOAs and forms with dynamic text in U.S. English; including but not limited to: dates, dollars, names, service hours.
4. CMIPS II shall have the functionality to support the identification of a user of the system to re-route printed forms to for exception processing.



5. CMIPS II shall provide the ability to re-route the distribution of a NOA or form to a previously identified user for exception handling processing.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **7.9 External Interface Architecture**

### **Requirement(s)**

1. CMIPS II shall integrate with existing external interface systems. If the integration requires interface agencies to replace or upgrade hardware, software, or communication infrastructure the Contractor must obtain the agencies prior approval. Specific interfaces are defined in Exhibit 6-1 SyRS - Interfaces.
2. All external interface mechanisms shall provide loosely coupled integration with the main application in order to provide a layer of isolation between the interface and the application to minimize impact of change.
3. All interfaces shall be electronic, i.e., network transfers, as determined by the State Project Manager.
4. All interfaces shall provide guaranteed and once-only delivery.
5. All interfaces shall detect and provide the functionality to support the correction of partial or interrupted deliveries.
6. CMIPS II shall be able to run multiple versions of an interface to accommodate staggered interface upgrades for the Counties.
7. The test system shall provide the functionality to support the full test of each interface including transmission and receipt.
8. CMIPS II shall provide functionality to centrally manage all interfaces system wide.
9. Some county partners do not have the ability to automatically receive or send data electronically. CMIPS II shall enable or disable an interface with a specific partner and alternatively allow transfer via different media.
10. The external interface architecture shall include media devices and removable media to read and create interface files that are compatible with interface agencies' equipment.
11. For all interfaces with Business Associates as pertaining to HIPAA regulations, CMIPS II shall comply with the HIPAA privacy and security rules. For further definition of the data and retention requirements for these activities, the relevant parts of the HIPAA privacy and security rules shall be referenced as defined in Paragraph 7, Operating Environment/Architecture.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **7.10 Reporting Architecture**

### **Requirement(s)**

1. CMIPS II shall provide reporting capabilities for all critical business functions as identified in Artifact 6 - Reports, located in the Bidder's Library. Reports are defined both as readable formatted reports for distribution on paper and/or alternate media, and data in a format that can be imported into standard office tools.



2. At a minimum, CMIPS II shall provide the user community the same reporting functionality as the Legacy CMIPS System. It is neither a requirement nor the intent that the Legacy CMIPS System reports be replicated by redevelopment in CMIPS II.
3. In addition to the Legacy CMIPS System reporting functionality, the following reporting requirements have been identified:
  - a. CMIPS II shall print the current function the user is working within the application, i.e., Screen Print.
  - b. The ability of a user role to generate reports shall be secured in the same manner as described in Paragraph 8.1.1, Application Security Architecture with the understanding that Provider, Recipient, and payroll information can not be updated in the reporting process.
  - c. CMIPS II shall provide users the functionality to run reports on demand or schedule reports to be executed during non-business hours.
  - d. CMIPS II shall provide users the functionality to cancel a report run before the end of the job.
  - e. CMIPS II shall provide error messages to the user if a report fails.
  - f. CMIPS II shall record error messages in a log if a report fails.
  - g. CMIPS II shall provide the functionality to schedule report production, including the following:
    - i) On-demand
    - ii) Daily
    - iii) Weekly
    - iv) Bi-weekly - every two weeks
    - v) Semi-Monthly - twice a month
    - vi) Monthly
    - vii) Quarterly
    - viii) Yearly.
4. The reporting architecture shall provide grouping and sorting, allowing the user to specify data to be grouped and sorted by, at a minimum: Fiscal Year, Funding Source, Recipient PCSP/IPW/IHSS-R Services, Recipient Characteristics, Provider Type, Provider relationship to Recipient, Social Worker, Social Worker Supervisor group, district office, zip code, County, and State.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **7.10.1 Report Distribution**

#### **Requirement(s)**

1. CMIPS II shall provide functionality to allow the setup of flexible report distribution scenarios on a single report or selected group. This functionality shall meet the following criteria:
  - a. Provide the capability for reports to be printed to a user default or alternate user specified printer

- b. Provide the capability to schedule when a report will be printed
- c. Provide for the online viewing of reports
- d. Print the entire report or a selected part
- e. Generate reports to be available in a format that can be downloaded to the user's desktop and imported into the common office suite products, including Microsoft Office Suite and Lotus Notes Suite
- f. Include mechanisms in which large files can be compressed before transmission to the user desktop and decompressed on receipt
- g. Automatically archive reports to local media as specified by the user
- h. Provide an alternate electronic solution for report archival and retrieval. The solution shall be an alternative to the existing user community practice of retaining reports beyond designated time periods by saving them in microfiche format. CMIPS II shall provide the retrieval of an archived report to be available online in not more than two (2) business days.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **7.11 Automated Timesheet Entry Architecture**

### **Requirement(s)**

1. CMIPS II shall automate the input of time and attendance data from timesheets for payroll. The solution shall reside at one (1) location to which all timesheets are mailed. All 58 counties will participate in this centralized solution. The intent is for Counties not to be burdened with the manual data entry of daily time for each case; however, the Counties must have the ability to manually enter or correct a timesheet for exception resolution purposes.
2. The solution shall support the business requirements defined in Paragraph 12.2.1, Time and Attendance.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **7.12 Data Retention/Archive**

Data in the CMIPS II system is required to be retained under Federal and State laws. An example of this would be case information which is required to be retained for a period of five and one half (5.5) years after the last expenditure report is submitted to the Federal Department of Health and Human Services and can therefore be assumed to be a minimum of five-and-a-half years (5.5) after the case is closed.

Exceptions to this rule include, but are not limited to, data that is involved in any legal dispute and data that is subject to Federal or State audit. This data is required to be kept until resolution.

The goal of the State is to have data in one (1) of three (3) states:

- Operational - Data online and used in the day-to-day operations of the program up to three (3) years.
- Online Archived - Data that is still required to be accessible online by the user but separated from operational data.

- Offline Archived - Data that is no longer required by Federal or State law or CDSS Policy and can be transferred offline.

**Requirement(s)**

1. Operational Data shall be kept online until all of the following criteria are met:
  - a. Recipient Case Data
    - i) The Recipient has been terminated for at least 90 days.
    - ii) All warrants associated with the Recipient have been cashed, voided, or are Stale Dated.
    - iii) There are no outstanding recovery actions for the Recipient.
    - iv) No payments have been made to the Recipient for at least 90 days.
    - v) The Recipient has no assigned Providers.
    - vi) All required tax filings related to payments to the Recipient's Providers are complete.
    - vii) There are no outstanding estate recovery actions for the deceased Recipient.
  - b. Provider Data
    - i) The Provider has been terminated for at least 90 days.
    - ii) All warrants associated with the Provider have been cashed, voided, or are Stale Dated (including lien warrants).
    - iii) There are no outstanding recovery actions for the Provider.
    - iv) No payments have been made to the Provider for at least 90 days.
    - v) Where appropriate the Provider has had all required tax filings made to cover their payments.
  - c. Payroll Data
    - i) Payroll data shall be kept online for a period of 2 years after creation.
2. Archived Data shall be retained online for inquiry purposes to support all Federal and State data retention laws, regulations and policies for not less than 5.5 years.
3. Data shall be moved offline from CMIPS II at the point in time it is no longer categorized as archived or operational data.
4. The offline archive process shall be flexible in the data retention periods specified and shall be suspended for purposes of an audit or legal dispute.
5. The system shall bring offline data back online within two (2) business days, for two (2) years after being moved offline.
6. CMIPS II shall pre-populate the data required for Initial Contact or Referral as defined in Paragraph 11.1.1, Initial Contact/Receive Referral from operational data or the online archive data if the recipient is known.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## 8 SYSTEM ADMINISTRATION

### 8.1 Security Requirements

#### 8.1.1 Application Security Architecture

A table showing each user role's associated functions and whether the role can modify or only view data is located in the Bidder's Library in Artifact 4 - User Roles. The number of estimated users by role is included in Artifact 1, Metrics; Table 2, Current County Staffing Levels; Table 3, Current Public Authority Staffing Levels; Table 4, Current CDSS Staffing Levels; and Table 5, Current DHS Staffing Levels. The Contractor can assume a 1% annual growth rate for number of CMIPS II users.

##### Requirement(s)

1. CMIPS II shall have a two-dimensional security architecture in that any particular user can be assigned the following:
  - a. One or more functional roles that can use specific application functions or functional groups
  - b. One or more views of the data, e.g., viewing data for a single office, multiple offices within a County, multiple Counties, or statewide.
2. CMIPS II shall support the addition and or modification of roles without coding modification through the use of reference tables.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### 8.1.2 User Security Management

Users are defined as not only the people who access CMIPS II but also all accounts having access to CMIPS II including those that provide support services, e.g., operators, administrators, etc.

##### Requirement(s)

1. CMIPS II shall support user authentication and authorization.
2. When remote access is available, CMIPS II shall support secure access.
3. CMIPS II shall support each user having a unique User ID that can be used regardless of physical location or workstation.
4. If CMIPS II has a stateless architecture, a virtual session shall be required for each user to provide authorization and authentication.
5. CMIPS II shall ensure that each User ID has a password that is at least eight characters in length and shall support alphanumeric and special characters.
6. At no point in CMIPS II shall passwords be visible.
7. Passwords shall not be stored in a readable form.
8. Passwords shall expire automatically after a specified period of time, as determined by the State Project Manager, and users shall be required to change expired passwords prior to gaining access to CMIPS II.

9. CMIPS II shall automatically deactivate User IDs that have not been accessed in a specified period of time as determined by the State Project Manager.
  10. User IDs that have attempted three (3) consecutive failed logon attempts shall be automatically deactivated by CMIPS II.
  11. CMIPS II shall automatically logoff a User ID that has been idle for more than a specified period of time as determined by the State Project Manager.
  12. CMIPS II shall allow the user to change his/her password.
  13. CMIPS II shall allow for passwords to be pre-expired.
  14. CMIPS II shall retain a history of user passwords and not allow the same password to be reused by a user during any twelve-month period.
  15. CMIPS II shall assign one or more roles/functional area to a User ID.
  16. Each system function shall check the authority level of a User ID and provide an error message if access is denied.
  17. CMIPS II shall allow a security officer in the County to affect users under their control in the following ways:
    - a. Add User IDs
    - b. Modify user security profiles
    - c. Terminate User IDs
    - d. Deactivate and reactivate User IDs
    - e. Reset user passwords
    - f. Inquire and report on User IDs and their roles
    - g. Report on account management activities for audit purposes.
- Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **8.1.3 System Security**

#### **Requirement(s)**

1. CMIPS II shall be able to restrict the access and functionality of all processes and users that are associated with CMIPS II, in addition to online application users. Examples of these processes include scheduled tasks, daemons, batch processes, operators, and support staff.
2. CMIPS II shall not execute the application or access the database as a privileged or an equivalent account.
3. CMIPS II shall be configured and maintained at a minimum C2 rating under the Trusted Computer System Evaluation Criteria: published by the [NCSC](#) (5200.28-STD). DEPARTMENT OF DEFENSE, TRUSTED COMPUTER SYSTEM EVALUATION CRITERIA, DOD 5200.28-STD, published by the National Computer Security Center ([NCSC](#)) or its equivalent under the Common Criteria Evaluation and Validation Scheme (CCEVS).
4. CMIPS II shall detect any attempt to gain of unauthorized access and send notification to a security officer along with any automated action, e.g., disabling an account.
5. In the event the designated security officer(s) is changed, CMIPS II shall route notifications to a different designated officer without modification to the code.

6. CMIPS II shall detect any attempt to perform of unauthorized functions, i.e., outside the users assigned role(s) by users with valid access to CMIPS II. In such an event, CMIPS II shall notify a designated security officer of these attempts.
7. CMIPS II capabilities shall allow implementation of a CMIPS II Data Security Plan, which satisfies State and Federal requirements including the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and State Administrative Manual ([SAM](#)), Section 4840 et seq., Information Technology Risk Management Policy.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **8.1.4 Security Audit Trail**

##### **Requirement(s)**

1. CMIPS II shall maintain audit trails at the system and application levels. CMIPS II shall record, retain and retrieve the required audit trails.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

##### ***8.1.4.1 System Audit Trail***

##### **Requirement(s)**

1. CMIPS II shall audit all changes made to any account within the system with the exception of password modification by the users.
2. CMIPS II shall, on a monthly basis, provide automated reports documenting changes made to any and all accounts within CMIPS II with the exception of password modification by the users.
3. CMIPS II shall support an audit of any attempts of unauthorized access to CMIPS II.
4. CMIPS II shall record and maintain the date and time of each successful and each unsuccessful login attempt on each account.
5. CMIPS II shall maintain operating system audit data online for not less than one (1) month prior to being archived. Archived data shall be available for not less than one (1) year and shall be retrievable within one (1) business day.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

##### ***8.1.4.2 Application Audit Trail***

##### **Requirement(s)**

1. Application audit capabilities shall include inquiry on the last online user to update a business transaction at the database record level with date time stamp, for all business transactions unless approved by the State Project Manager.
2. CMIPS II shall track and report when information is disclosed to external agencies, including, but not limited to, origin of the request, where the data was sent, and the reason for disclosure.
3. Each audit log record shall contain sufficient key information to identify which records were effected, what effect was made, the date and time the effect was made, and by which user the effect was made.

4. CMIPS II shall support inquiry on the audit trail including access by Recipient, Provider, application function, User or date range.
5. CMIPS II shall have the application audit trail data available online for a period of not less than three (3) months and available from archive for a period not less than stated in Federal and State regulations. Archived Audit Data shall be retrievable within two (2) business days.
6. At the application level, CMIPS II shall support compliance with Federal and State laws for data confidentiality, privacy, and disclosure including the HIPAA regulations stated in Section 5.2, W&IC §10850 Confidentiality of Individual Data, California Civil Code §1798.24 et seq., Confidentiality and Disclosure of Personal Information.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **8.1.5 Data Distribution Security**

As stated in Paragraph 7.10.1, Report Distribution, and Paragraph 18, Interfaces, there is potential for confidential data to be sent and/or received over the public network and to and from partners who are outside the secure network.

#### **Requirement(s)**

1. CMIPS II shall allow secure transfer of data to and from external partners, which shall include remote users downloading confidential data from CMIPS II.
2. The Data Distribution architecture security shall be based on industry standards and support the requirements defined in Section 6, SOW, Paragraph 4.4.5, System Security.
3. CMIPS II shall comply with [HHSDCDTS](#) network security policies.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **9 SYSTEM PERFORMANCE**

### **9.1 Availability**

#### **Requirement(s)**

1. Online availability is defined as one hundred percent (100%) of PCSP/IPW/IHSS-R offices connected directly via the [HHSDCDTS](#) WAN having full functionality online processing access to the CMIPS II system. The online CMIPS II system shall have a minimum scheduled uptime of five (5) days a week (Monday - Friday) during the hours of 6:00 AM to 7:00 PM throughout the operational calendar year. CMIPS II shall be available no less than 99.9 percent of scheduled uptime in any calendar month and no less than 99.9 percent per calendar year. ~~The requirement of 99.9 percent of scheduled uptime is not breached if downtime results from a State Data Center or Network Services failure for the services that are defined in Artifact.15A—State Data Center Statement of Work and Artifact 15B—HHSDC Network Services Statement of Work.~~
2. Failures that are not attributable to the Contractor, as determined by the State Project Manager, shall not be considered as unscheduled downtime for the purposes of availability calculation.
3. Routine maintenance shall be scheduled to occur outside of online availability hours and shall not impact online availability or performance.



4. Routine maintenance shall be documented and communicated to the users, at least one month prior to when it is to be performed.
5. Upon a minimum of 3 business days prior notice, the system shall be made available, at the request of the State Project Manager, for up to ten (10) days outside the CMIPS II operational calendar as defined in Paragraph 9.1.1, Operational Calendar Year.
6. The system shall be available for use outside the required availability requirements when it is not being actively maintained. Downtime during these periods shall not be counted as unplanned downtime.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **9.1.1 Operational Calendar Year**

#### **Requirement(s)**

1. For the purposes of availability and support, CMIPS II shall be operational every day specified in Paragraph 9.1, Availability, with the following exceptions:
  - a. Days identified by the State for the observance of the following recognized holidays:
    - i) New Year's Day
    - ii) Presidents Day
    - iii) Memorial Day
    - iv) Independence Day
    - v) Labor Day
    - vi) Veterans Day
    - vii) Thanksgiving Day
    - viii) Christmas Day.
  - b. State staff members will not be available to support payroll activities such as SCO Claim File submission and Claim Schedule approval on State holidays not listed in this paragraph. There will be no payroll tape submitted to SCO on State holidays.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **9.2 Online Response**

#### **Requirement(s)**

1. Any transaction identified that exceeds the response times stated in Paragraph 9.2.1, System Response Times, and Paragraph 9.2.2, User Response Times, shall require approval of the State prior to implementation, e.g., Reports.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **9.2.1 System Response Times**

#### **Requirement(s)**

1. The following system response times, as defined in Section 11, CONTRACT, Paragraph 8.2.6.3, CMIPS II System Response Times, shall be required:
  - a. One (1) second ninety-five percent (95%) of the time for any processing that does not interact with the database



- b. One (1) second ninety percent (90%) of the time for any process interacting with the database
- c. No response time shall exceed fifteen (15) seconds, e.g., Logon, Application Activation.  
Bidder agrees to the above requirement(s)? YES \_\_\_\_\_ NO \_\_\_\_\_

## **9.2.2 User Response Times**

### **Requirement(s)**

- 1. The following user response times, as defined in Section 11, CONTRACT, Paragraph 8.2.6.4, CMIPS II User Response Times, shall be required:
  - a. No more than two seconds ninety percent (90%) of the time for any processing that does not interact with the database
  - b. No more than three seconds ninety percent (90%) of the time for any process reading the database
  - c. No response time shall exceed fifteen (15) seconds, e.g., Logon, Application Activation.  
Note: These response time requirements are for users accessing the application over the ~~HHSDCDTS~~ WAN and are not intended for external users including dial-up and remote Internet access.
- 2. The system shall support a user typing at least one hundred (100) words per minute without lag in character display.  
Bidder agrees to the above requirement(s)? YES \_\_\_\_\_ NO \_\_\_\_\_

## **9.3 Performance Monitoring**

### **9.3.1 System Response Monitoring**

#### **Requirement(s)**

- 1. CMIPS II shall continuously monitor and report system response times, and shall provide the following:
  - a. Produce automated monthly summary reports of response time statistics, including the metrics defined in Paragraph 9.2.1, System Response Times
  - b. Produce automated reports of response time metrics for each fifteen (15) minute period for a date/time range in detail or in summary
  - c. Produce automated reports of the number of periods in any calendar month that do not meet the performance requirements as defined in Paragraph 9.2.1, System Response Times
  - d. Produce automated monthly summary reports of batch processing times for individual steps
  - e. Produce ad hoc daily reports upon request
  - f. Retain data for six (6) months, at a minimum
  - g. Report the percentage of successful transactions

- h. Report the percentage of unsuccessful transactions and detail each failed transaction with the reason for the failure.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **9.3.2 User Response Time Monitoring**

#### **Requirement(s)**

1. CMIPS II shall monitor user response time and report on each component of the enterprise for a client located on the State WAN, configured as required in Paragraph 7.2.1, Workstation Configuration, item 1 and Paragraph 7.2.2, Workstation Software.
2. Enterprise component metrics shall include the following:
  - a. System Metrics
  - b. Database Metrics
  - c. Middle Tier Metrics
  - d. Client Metrics
  - e. Network Metrics.
3. Using the client specified in item 1 of Paragraph 9.3.2, User Response Time Monitoring, CMIPS II shall provide the functionality to calculate, display, and report the user response time for specified user role(s) and data (i.e. simulate operations statewide or for a specific county) upon request of an authorized user.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **9.4 Development and Testing Performance**

#### **Requirement(s)**

1. CMIPS II shall provide sufficient capacity in the development and test systems to allow testing to be conducted without interruption or delay. These systems shall also provide the infrastructure and software tools to allow the requirements of the software development life cycle to function successfully. In addition, the following are specific requirements:
  - a. User Acceptance Test system(s) shall provide user response times that are not degraded more than fifty percent (50%) from the production system requirements.
  - b. The Performance Test system(s) shall have a comparative architecture and sufficient capacity to accurately model the production system for the CMIPS II caseload. The Performance Test system is not required to include architectural elements of the production system that are designed specifically for high availability. Current Caseload numbers can be found in Artifact 1 - Metrics, and forecasted caseload growth can be found in Artifact 12 - CDSS Estimated Caseload Growth, located in the Bidder's Library.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **10 GENERAL BUSINESS REQUIREMENTS**

The general business requirements described below apply to all functions of CMIPS II. Refer to Artifact 7 - Information Groupings, located in the Bidder's Library, for a list of information to be collected and entered for the business processes. Refer to Artifact 5 - Recommended Forms, located in the Bidder's Library, for the proposed forms to be used during the business processes.

**Requirement(s)**

1. CMIPS II shall capture, track, and display all data in all records required for the user to perform the applicable business functions, as determined by the State Project Manager.
2. CMIPS II shall accept corrections, changes, and deletions to all data in records, as required by the business functions and after successfully completing system validation.
3. An individual person (Provider or Recipient) shall only exist one time in the operational database. However, data archiving procedures may result in some duplication of data. A person may have multiple types or roles, i.e., a Provider may also be a Recipient.
4. CMIPS II shall provide the ability for users to access multiple cases concurrently from the same workstation.
5. All changes that are successfully completed by the user shall be applied to the database online in real-time.
6. CMIPS II shall support all interfaces as defined in Exhibit 6-1 SyRS - Interfaces.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

**10.1 Online Searches**

CWD PCSP/IPW/IHSS-R staff access CMIPS II to determine whether an Applicant is currently receiving PCSP/IPW/IHSS-R services, or has received PCSP/IPW/IHSS-R services in the past.

**Requirement(s)**

1. CMIPS II shall search for a person based on the following criteria:
  - a. Social Security Number, full or partial last name
  - b. Statewide Client Index (SCI), Client Information Number (CIN) (Recipient only)
  - c. MEDS number, and/or PCSP/IPW/IHSS-R case number
  - d. Additional selectable search criteria shall include, but not be limited to: address, first name, date of birth, County, person type (Applicant, Recipient, and Provider) and gender.
2. CMIPS II shall have a user interface to search for both Providers and Recipients.
3. CMIPS II shall support "Soundex" (or equivalent), a phonetic coding index that searches on the way a name sounds rather than the way it is spelled.
4. Recipient searches shall be statewide by default, but the search shall be limited to the user's own County if requested.
5. Recipient searches shall default to Recipients currently receiving PCSP/IPW/IHSS-R services, but the search shall be able to be expanded to Recipients in any or all statuses if requested.
6. Provider searches shall be statewide by default, but the search shall be limited to the user's own County if requested.
7. Provider searches shall be limited by default to Providers currently employed, but the search shall be able to be expanded to Providers in any or all statuses, if requested.
8. CMIPS II shall search for a person statewide, by County, or by district office, based on user security roles.
9. CMIPS II shall return a list of persons who match the search criteria, as follows:

- a. Data included in the search results shall include, at a minimum: Social Security Number, SCI number, MEDS number, PCSP/IPW/IHSS-R case number, last name, first name, date of birth, address and person type
  - b. CMIPS II shall prompt the user to select the desired person, or to re-search using different criteria.
10. Upon selection of a person, CMIPS II shall display, at a minimum:
- a. Person type (Recipient, Provider) and if a person exists as multiple types, then CMIPS II shall display all types
  - b. Demographic information: name, address, birth date, County, language spoken, phone number
  - c. Case information: status, status date, PCSP/IPW/IHSS-R case number, MEDS or SCI case number, County, district office location, Social Worker assigned to the case
  - d. Case information for Recipients: hours authorized, last assessment date, date of initial application, status and status date, list of all linked Providers defined in (e)
  - e. Case information for Providers: total hours authorized, last paid date and paid hours, status and status date, list of all linked Recipients by name and SSN, authorized hours per Recipient, and PA or equivalent
  - f. Indicators for prior or current PCSP/IPW/IHSS-R Recipient or Provider SSN validated.
- Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **11 RECIPIENT CASE MANAGEMENT**

The Recipient Case Management component of CMIPS II includes the Case Initiation and Case Maintenance subcomponents. The goals of Case Management are as follows:

- To follow the County Preferred Business Processes identified in Phase 3 of the Business Process Improvement (BPI) (CMIPS Procurement Project)
- To allow PCSP/IPW/IHSS-R staff to capture Recipient and Provider data at the point and time of receipt, primarily during initial intake, needs assessment or any change of status/address by means of a PC workstation in an PCSP/IPW/IHSS-R Office
- To provide appropriate users, security withstanding, access to County and statewide PCSP/IPW/IHSS-R data to complete their job functions
- To provide for users to track changes in a case identified by the County Preferred Business Processes
- To allow users to maintain case data without Contractor intervention.

### **Requirement(s)**

1. The Recipient Case Management function of CMIPS II shall allow the County Welfare Department (CWD) to capture, track, and manage case information.
2. Upon a change to Recipient information, CMIPS II shall automatically update all relevant designated Provider information for any Providers linked to the Recipient.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **11.1 Case Initiation**

The Case Initiation function encompasses the intake, application, needs assessment, Provider assignment, and determination processes of a case, and allows the CWD to authorize PCSP/IPW/IHSS-R services to a Recipient.

### **Requirement(s)**

1. The Case Initiation subcomponent of CMIPS II shall include the following functions: Initial Contact/Receive Referral, Intake/Application Information, Needs Assessment, Assign Modes of Service, and Final Determination.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_ NO \_\_\_\_\_

### **11.1.1 Initial Contact/Receive Referral**

The Intake function of CMIPS II allows the County Welfare Department (CWD) to capture, track, and manage referrals for PCSP/IPW/IHSS-R services.

CWD PCSP/IPW/IHSS-R staff receives referrals for PCSP/IPW/IHSS-R services typically by telephone from family members, Providers, or potential Recipients. Referrals can also be made from any number of other sources (hospital discharge planners, physicians, walk-ins, health workers, etc.). Referrals may also be received from other Counties as an inter-county transfer (Paragraph 11.2.2.2, Inter-County Transfers).

Several Counties receive referrals for PCSP/IPW/IHSS-R services from external County offices and from other departments within the CWD. For example, Los Angeles County receives all requests for County PCSP/IPW/IHSS-R services through a centralized phone system, and electronically distributes requests for PCSP/IPW/IHSS-R services to the CWD or appropriate PCSP/IPW/IHSS-R office. Placer County receives the majority of PCSP/IPW/IHSS-R referrals through a third party referral service.

The PCSP/IPW/IHSS-R Screener accesses CMIPS II during the initial contact with the Applicant, and uses standard statewide regulations and guidelines to screen the Applicant for initial PCSP/IPW/IHSS-R eligibility. The Screener enters appropriate information into CMIPS II. If the applicant is known to the Statewide Client Index (SCI) system, the SCI and MEDS related information available from SCI pre-populates the appropriate information in CMIPS II. The Screener can then verify the information with the Applicant, entering updated information if necessary. The Screener reviews the MEDS related data returned from SCI to determine if the Applicant is currently enrolled in Medi-Cal. Those disabled Applicants currently receiving Social Security Income/State Supplemental Payment (SSI/SSP) and Applicants over the age of sixty-five (65) receiving Medi-Cal are marked as potentially status eligible for PCSP/IPW/IHSS-R services and recorded in CMIPS II as such. All other Applicants are recorded as potentially eligible for PCSP/IPW/IHSS-R services.

CMIPS II notifies the Social Worker Supervisor of the new referral and provides automated assistance in assigning the Social Worker. Supervisors typically assign Social Workers by geographic region, language, or caseload, and periodically reassign cases to balance the workload. CMIPS II notifies the Social Worker of the new case assignment. The Social Worker proceeds with the Intake/Application Information process.

**Requirement(s)**

1. CMIPS II shall receive and process data files of referral information from State approved third party and County systems.
2. Upon receipt of referral data files, CMIPS II shall validate available information (i.e., SSN if available and street address if available) and process the referral.
3. For each referral received by a data file (i.e., a third party referral system), CMIPS II shall produce a case event as defined in Paragraph 14.1.1, Case Event Management, based upon the Applicant's County of residence.
4. CMIPS II shall accept a user-entered referral.
5. On entry of a referral, if a person matching the search criteria does not exist, CMIPS II shall create a new Applicant.
6. On entry of a referral, if the person exists in CMIPS II and is not a current Recipient, CMIPS II shall use the prior PCSP/IPW/IHSS-R case number and default to the prior case information for updating.
7. CMIPS II shall track Applicant's ethnicity pursuant to CDSS Manual of Policies and Procedures (MPP) 30-759.11.
8. CMIPS II shall track Applicant's primary language pursuant to MPP 30-759.11.
9. CMIPS II shall capture, track, and report on Race and Ethnicity as defined by the Office of Management and Budget, Revisions to the Standards for the Classification of Data on Race and Ethnicity, Notice 58782 as published in the Federal Register, Vol. 62, No. 210, October 30, 1997.
10. CMIPS II shall assign a County identifier to every Applicant/Recipient pursuant to MPP 23-251.
11. At entry of referral information, CMIPS II shall accept data as described in Paragraph 11.1.2.4, Medi-Cal Eligibility Verification.
12. If data is not available via an interface, CMIPS II shall accept a user entered SSI/SSP status, restaurant meal allowance, Medi-Cal Share of Cost and Medi-Cal aid code. The user manually obtains this data from MEDS.
13. Upon completion of the application data entry, CMIPS II shall accept an indication from the user that the case needs Social Worker assignment.
14. CMIPS II shall provide the user a means to assign a specific Social Worker to a specific case (Social Worker assignment).
15. CMIPS II shall display the following information to assist the user in Social Worker assignment:
  - a. Social Worker Information
    - i) Name
    - ii) Identifier
    - iii) Assigned County
    - iv) Assigned District
    - v) Supervisor
    - vi) Primary Language



- vii) Secondary Language
  - viii) Current case count by case status
  - ix) Assigned zip code(s)
  - b. Applicant information:
    - i) Name
    - ii) Identifier
    - iii) Primary Language
    - iv) Secondary Language
    - v) Residence zip code.
  - c. CMIPS II shall produce a case event notifying the Social Worker of the assignment as defined in Paragraph 14.1.1, Case Event Management.
- Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **11.1.2 Intake/Application Information**

The Social Worker contacts the individual referred for PCSP/IPW/IHSS-R services and, if the individual agrees, processes an application for PCSP/IPW/IHSS-R services. The Social Worker enters all information required for an application into CMIPS II. If not already received, CMIPS II accesses the DHS Statewide Client Index (SCI) to either retrieve the existing Client Index Number (CIN) or request a new CIN. The Social Worker proceeds with the Needs Assessment Process.

#### **Requirement(s)**

1. CMIPS II shall accept each request or application for PCSP/IPW/IHSS-R services in accordance with MPP 30-009.22, pursuant to MPP 30-759.1.
2. CMIPS II shall accept a retroactive application pursuant to 22 California Code of Regulations (CCR) §50145(b).

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **11.1.2.1 Automated Address Verification**

CWD PCSP/IPW/IHSS-R staff enter a new address or update an existing address for an Applicant, Recipient, or Provider in CMIPS II.

#### **Requirement(s)**

1. CMIPS II shall provide a software capability that can verify street addresses, cities, and zip codes against a USPS certified master address file.
2. CMIPS II shall verify the address, make any changes according to the USPS software, and add the last six (6) digits (zip +4 +2) of the zip code.
3. CMIPS II shall allow the user to accept, override, or correct the address changes.
4. All addresses entered, stored, and reported in CMIPS II shall meet Postal Addressing Standards as defined in United States Postal Service Publication 28, Postal Addressing Standards.
5. CMIPS II shall exclude foreign addresses from the Automated Address Verification process.

6. CMIPS II shall attempt to match the address with a United States Postal Service (USPS) certified address file and recommend corrections to the address entry.
7. CMIPS II shall display the best match for the address and describe the results of the address verification.
8. On request from an authorized user, CMIPS II shall produce a Change of Address form for Recipient or Provider signature.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **11.1.2.2 Social Security Number Validation and Verification**

CWD PCSP/IPW/IHSS-R staff enter a new SSN or update an existing SSN for an Applicant, Recipient, or Provider in CMIPS II. CMIPS II validates the SSN entry against known algorithms and verifies the SSN via an interface with DHS's MEDS application. CMIPS II will track the results of the SSN verification and validation. Any SSN that cannot be verified and validated are to be marked as invalid, and the County does research and corrects the invalid SSN using a manual process.

##### **Requirement(s)**

1. Pursuant to W&IC §14011.2 and 22 CCR §50157, CMIPS II shall require a SSN for every application.
2. CMIPS II shall validate the SSN using known algorithms and reject entry of a failed SSN with the following exception:
  - a. If the SSN was issued before the date of birth, CMIPS II shall send a notification of the failure but allow entry of the SSN.
3. Upon entry of a duplicate SSN already known to CMIPS II, CMIPS II shall generate a warning message specifying the SSN is a duplicate and only allow entry of the duplicate SSN by an authorized user.
4. CMIPS II shall verify new and modified SSNs entered into CMIPS II, for Providers and Recipients, using the DHS copy of the Social Security Administration's (SSA) SSN master file.
5. Upon SSN verification, CMIPS II shall indicate that the SSN has been verified.
6. CMIPS II shall flag the SSN as invalid and send a notification if the Provider or Recipient does not match the SSA SSN master file or if the SSN cannot be found on the SSA SSN master file.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **11.1.2.3 Client Index Number Assignment**

CWD PCSP/IPW/IHSS-R staff enter a new Applicant in CMIPS II. CMIPS II either displays the currently existing CIN or retrieve potential CINs via DHS's SCI application. PCSP/IPW/IHSS-R staff selects the appropriate CIN. If there are no potential matches, PCSP/IPW/IHSS-R staff request to add the Recipient to SCI. SCI searches for duplicates. If duplicates are found, PCSP/IPW/IHSS-R staff select the correct match. CMIPS II provides the match or new information to SCI.



**Requirement(s)**

1. Upon entry of a new Applicant, CMIPS II shall either display the CIN that exists in CMIPS II, or request a CIN match from SCI by means of a real-time interface.
2. CMIPS II shall retrieve potential matches from SCI. For each potential match, CMIPS II shall display the SCI information, including but not limited to the following:
  - a. County
  - b. CIN
  - c. SSN
  - d. Name
  - e. Birth Date
  - f. Gender
  - g. Address.
3. If no match is returned from SCI, CMIPS II shall perform the following:
  - a. Retrieve new CIN from SCI
  - b. Apply the CIN to the Applicant
  - c. Notify SCI of the add.
4. If one or more matches are returned from SCI, CMIPS II shall enable the user to select the appropriate match and then perform the following:
  - a. Use the selected SCI data to populate the corresponding CMIPS II data fields
  - b. Notify SCI of the match.
5. CMIPS II shall display responses received from SCI and allow users to edit the data.
6. If the user edits the data, CMIPS II shall notify SCI and transmit the new data values.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

**11.1.2.4 Medi-Cal Eligibility Verification**

During the Client Index Number Assignment process, The SCI interface provides Medi-Cal eligibility information for those recipients receiving Medi-Cal services.

**Requirement(s)**

1. Upon entry of a new Applicant, CMIPS II shall retrieve Medi-Cal eligibility information during Client Index Number assignment as described in Sec 6, SyRS, Paragraph 11.1.2.3, Client Index Number Assignment through the SCI real-time interface.
2. For an SCI match that shows the applicant is currently eligible for Medi-Cal, CMIPS II shall pre-populate data fields, including but not limited to the following:
  - a. Medi-Cal Share of Cost
  - b. Medi-Cal Primary Aid Code

**11.1.3 Service Eligibility**

On receipt of referral for PCSP/IPW/IHSS–R services, the user enters the applicant information in CMIPS II. If an applicant is not known to be currently eligible for Medi-Cal Services as indicated through the SCI real-time interface, CMIPS II sends a notification via an interface to

the appropriate SAWS application requesting an initial Medi-Cal eligibility determination. On completion of the Medi-Cal eligibility determination process, the Medi-Cal Eligibility Technician updates the appropriate SAWS application. The SAWS application then sends a notification back to CMIPS II, via the interface, of the determination.

A "status eligible" applicant is entitled to be assessed for PCSP/IPW/IHSS-R services on the basis of being categorically eligible; which means eligible for SSI/SSP, or receiving Medi-Cal services at no cost to the Recipient.

An "income-eligible" applicant is eligible for PCSP/IPW/IHSS-R services with a Share of Cost. Medi-Cal Eligibility Technicians assess these individuals' financial situations to determine if they meet thresholds to receive PCSP/IPW/IHSS-R services with a Share of Cost. These Recipients may pay the Share of Cost directly to their Provider after PCSP/IPW/IHSS-R services are provided, usually after the first pay period in a month. The Share of Cost is applied against the Provider's wages before CMIPS II issues a warrant for money, unless the County elects to have the Recipient pay the Share of Cost to the County. If the Share of Cost exceeds the amount of the wages, an earnings statement (with a zero amount warrant) is still generated and mailed to the Provider. Based on the income calculations and eligibility for other Medi-Cal Programs, it is possible that a Recipient has a zero dollar (\$0.00) Share of Cost. After initial Medi-Cal eligibility has been determined, the Social Worker proceeds with the Needs Assessment Process. The Medi-Cal Eligibility determination and the PCSP/IPW/IHSS-R Needs Assessment may or may not occur simultaneously.

#### **Requirement(s)**

1. CMIPS II shall notify the appropriate SAWS system of pending PCSP/IPW/IHSS-R cases as defined in Exhibit 6-1 SyRS - Interfaces.
2. CMIPS II shall accept a user entered aid code for Recipients who are status eligible for PCSP/IPW/IHSS-R services pursuant to MPP 23-275.2.
3. CMIPS II shall determine the Funding Program Aid Code (PCSP, IPW, or IHSS Residual) based on specific recipient demographics, authorized services and the recipient's relationship to their Provider.
4. CMIPS II shall accept, report and track a total of three aid codes;
  - a. The Medi-Cal Primary Aid Code received via the SCI or SAWS interface
  - b. The Funding Program Aid Code (PCSP, IPW, or IHSS Residual) determined by the CMIPS II system based on specific recipient demographics, authorized services and the recipients relationship to their Provider.
  - c. A County user-entered Aid Code identifying the applicant/recipient as aged, blind or disabled.
5. Valid aid codes shall be limited to those identified in the Management and Office Procedures Assignment of State Numbers Handbook found in the Bidder's Library.
6. A Recipient's address change from California to any other state shall trigger a notification for the user to verify eligibility, pursuant to MPP 30-770.42 and 30-770.452.
7. A Recipient's address change or update from USA to any other country shall trigger a notification for the user to verify eligibility, pursuant to MPP 30-770.46.

8. CMIPS II shall accept, report and track the beginning date of eligibility pursuant to 22 CCR §50193.
9. CMIPS II shall accept a user-entered eligibility date, the MEDS eligibility date as provided through the SCI interface or the SAWS generated eligibility date.
10. CMIPS II shall accept and track three (3) months retroactive eligibility.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_ NO \_\_\_\_\_

#### **11.1.3.1 Medi-Cal and IHSS Residual Income Eligibility (Share of Cost)**

During the intake process if an Applicant is determined not to be status service eligible for PCSP/IPW/IHSS-R services, a Medi-Cal or an IHSS Residual income eligibility determination is needed.

Upon user request for a Medi-Cal income eligibility determination, CMIPS II sends the request to the appropriate SAWS system via an interface. The Medi-Cal Eligibility Technician performs the required Medi-Cal eligibility calculations and determines Medi-Cal income eligibility. For those Applicants determined to be Medi-Cal income eligible, the SAWS system calculates the Medi-Cal Share of Cost amount and determines the Medi-Cal Primary Aid Code. Due to Medi-Cal rules, the Share of Cost amount may be zero (\$0.00). The SAWS system returns the Medi-Cal eligibility status, the Medi-Cal Share of Cost, and the Medi-Cal Primary Aid Code to CMIPS II.

For PCSP/IPW Recipients whose Medi-Cal Share of Cost is greater than zero, an IHSS Share of Cost determination is performed. The IHSS SOC calculation is performed outside of the CMIPS II application; however, it is recorded in CMIPS II. CMIPS II tracks the Medi-Cal Share of Cost and IHSS Share of Cost for the purposes of payment of Medi-Cal recognized expenses and for payroll claims processing as described in Paragraph 12.2.4.1.1.1, Medi-Cal Recognized Expense (MRE) and Paragraph 12.2.4.1.1.2, Share of Cost Spend Down.

For the small percentage (less than .05% of statewide caseload) of cases identified as IHSS Residual, an IHSS Residual Share of Cost determination may be required. The IHSS Residual Share of Cost computation process will be performed outside of the CMIPS II application. When appropriate, on completion of the IHSS Residual Share of Cost determination, PCSP/IPW/IHSS-R staff enter the IHSS-Residual Share of Cost into the CMIPS II application.

The Medi-Cal Income Eligibility and PCSP/IPW/IHSS-R Needs Assessment processes may occur simultaneously or in either order, depending upon the County business practices. If the Applicant is Medi-Cal income eligible, the Social Worker proceeds with either the PCSP/IPW/IHSS-R Needs Assessment or PCSP/IPW/IHSS-R Final Determination Process.

#### **Requirement(s)**

1. CMIPS II shall request an income calculation from the appropriate SAWS system.
2. Upon receipt of the Medi-Cal Share of Cost and Medi-Cal Primary Aid Code information from the SAWS system, CMIPS II shall notify the user as defined in Paragraph 14.1.1, Case Event Management.
3. CMIPS II shall accept a user entered IHSS Share of Cost.
4. CMIPS II shall accept user entered Aid Codes.

5. CMIPS II shall retain and track both Medi-Cal Share of Cost and IHSS Share of Cost for Share of Cost Medi-Cal Recognized Expense processing and payroll claims processing as described in Paragraph 12.2.4.1.1.1, Medi-Cal Recognized Expense (MRE) and Paragraph 12.2.4.1.1.2, Share of Cost Spend Down for the PCSP/IPW Recipients.
6. All Share of Cost amounts shall be calculated for a full month.
7. Share of Cost amounts shall be effective the first day of the month in which service hours are authorized.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **11.1.3.2      *Share of Cost Adjustments***

Whenever there is a change in financial circumstances, Social Security payments, or SSI/SSP benefit levels, the appropriate SAWS system recalculates the Medi-Cal Share of Cost amount. The SAWS system notifies the CMIPS II system of whether the Recipient remains Medi-Cal income eligible and provides the Medi-Cal Share of Cost and the Medi-Cal Primary Aid Code. Upon any change in Medi-Cal income eligibility status or Medi-Cal Share of Cost, CMIPS II provides a case event as defined in Paragraph 14.1.1, Case Event Management, to the Social Worker. The Social Worker may proceed with the PCSP/IPW/IHSS-R Needs Assessment process, if required by circumstances.

##### **Requirement(s)**

1. Upon receipt of any change to a Share of Cost amount, CMIPS II shall produce a case event as defined in Paragraph 14.1.1, Case Event Management, to notify the user of the change.
2. Upon receipt of a decrease in the Recipient's Share of Cost and appropriate County authorization, CMIPS II shall retroactively process an adjustment to refund the Share of Cost to the Recipient pursuant to 22 CCR §50653.3.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **11.1.3.3      *Needs Assessment***

On completion of the Application process, the Social Worker schedules an In-Home Visit with the Applicant to determine the need for PCSP/IPW/IHSS-R services. Based on the Applicant's ability to safely perform certain tasks, the Social Worker ranks the Recipient's functional limitations and assesses the Functional Index ranking indicating whether the Recipient can perform a task independently, or if unable to perform independently, the level of assistance needed. Based on the Functional Index (FI) rankings, the Social Worker determines the types of PCSP/IPW/IHSS-R services needed and the amount of time the County authorizes for each service. Although the Social Worker overall authorization of services is influenced by the FI rankings, there is no direct correlation between a functional index ranking and the types of services authorized. The assessment includes the Social Worker's observations as well as information given by the Applicant, family, friends, physician, or other health practitioners.

During the Needs Assessment, the Social Worker captures all pertinent information related to the Recipient's need for PCSP/IPW/IHSS-R services. On return to the office, the Social Worker enters the captured data into CMIPS II. The Social Worker determines hours of need for each of twenty-five (25) tasks, adjusting the hours based on hours apportioned to other individuals living in the household, the relationship of the Individual Provider with the Applicant, and whether the

need for the service is met for the Recipient individually or met in common with others in the household. This prorated amount is the "individual assessed need." This value can be further adjusted if a formal (e.g., Adult Day Health Care or Home Health Agency) or informal alternative resource or family member or friend is available.

Based on the Applicant's individual assessed need, the appropriate number of hours for PCSP/IPW/IHSS-R services is entered into CMIPS II. Based on the number of service hours entered, CMIPS II determines whether the Applicant is "severely impaired" (SI) or "non-severely impaired" (NSI). The maximum allowable hours for NSI will change if the Recipient is PCSP service eligible and has an enrolled Provider. The hours needed may exceed the maximum allowable hours. These unmet needs hours are tracked in CMIPS II.

The Social Worker assesses the Applicant's PCSP/IPW/IHSS-R needs in the case of a disaster. The PCSP/IPW/IHSS-R Caseload Disaster Preparedness (DP) Assessment Plan provides a safety check for thousands of elderly and disabled PCSP/IPW/IHSS-R Recipients who might be unable to care for themselves, or even call for help, in the aftermath of a disaster.

If the Applicant has a need for PCSP/IPW/IHSS-R services, the Social Worker proceeds with the Assign Modes of Service and Final Determination processes.

If the Social Worker determines that the Applicant is service ineligible for PCSP/IPW/IHSS-R, or the Applicant decides against PCSP/IPW/IHSS-R services during the PCSP/IPW/IHSS-R Needs Assessment, the Social Worker then proceeds with the Recipient PCSP/IPW/IHSS-R Application Withdrawn/Denied process.

#### **Requirement(s)**

1. CMIPS II shall track those PCSP/IPW/IHSS-R Recipients who are at risk during disasters to support disaster preparedness.
2. CMIPS II shall accept authorization for presumptive eligibility Applicants for emergency PCSP/IPW/IHSS-R services pursuant to MPP 30-759.3 and 30-759.8.
3. CMIPS II shall capture assessed hours by PCSP/IPW/IHSS-R task.
4. CMIPS II shall compare assessed task hours to pre-determined PCSP/IPW/IHSS-R task guideline minimums and maximums.
5. When assessed PCSP/IPW/IHSS-R task hours are outside the minimum or maximum PCSP/IPW/IHSS-R task guidelines, CMIPS II shall notify the user and require an entry of a justification for not meeting or exceeding task guidelines.
6. CMIPS II shall accept one-time only tasks (e.g., heavy cleaning, yard abatement, etc.) within an authorized date range.
7. CMIPS II shall automatically remove all one-time only tasks, issue a case event and recalculate the total authorized hours upon expiration of the authorization date range.
8. For the Needs Assessment, CMIPS II shall track the types and hours of PCSP/IPW/IHSS-R services needed and the services which are paid for by the PCSP/IPW/IHSS-R Program pursuant to MPP 30-761.24.
9. For the needs assessment, CMIPS II shall display all PCSP/IPW/IHSS-R services defined by W&IC §12300.

10. For the needs assessment, CMIPS II shall display the itemized need for PCSP/IPW/IHSS-R services and include all of the information required by MPP 30-761.27.
11. CMIPS II shall not authorize meal preparation, meal clean up, menu planning, or food shopping services if a Recipient receives a meal allowance through the PCSP/IPW/IHSS-R program pursuant to MPP 30-757.134.
  - a. CMIPS II shall accept the assessed need for these PCSP/IPW/IHSS-R services.
  - b. CMIPS II shall deduct the total hours authorized for purchase for the PCSP/IPW/IHSS-R services identified above from the total monthly hours authorized for purchase.
12. CMIPS II shall accept corrections and changes to the PCSP/IPW/IHSS-R time-per-task guidelines for assessed task hours.
13. CMIPS II shall capture the reason for any PCSP/IPW/IHSS-R time-per-task corrections pursuant to MPP 30-758.41.
14. CMIPS II shall accept the entry of service hours in increments (one-time, daily, weekly, monthly) as described in MPP 30-758.1.
15. Using the hours entered for each service pursuant to MPP 30-758.1, CMIPS II shall calculate the number of hours per week needed for each of the assessed PCSP/IPW/IHSS-R services pursuant to MPP 30-763.2. CMIPS II shall exclude one-time and monthly authorized services from the number of hours per week total.
16. Assessed PCSP/IPW/IHSS-R services shall include, at a minimum, all PCSP/IPW/IHSS-R services pursuant to MPP 30-757.1 and 30-780.1.
17. CMIPS II shall capture and track PCSP/IPW/IHSS-R services the Recipient is eligible for and refused.
18. CMIPS II shall calculate the total authorized PCSP/IPW/IHSS-R hours per week and per month, indicating any unmet need pursuant to MPP 30-761.26.
19. CMIPS II shall not include any refused PCSP/IPW/IHSS-R services in the total authorized hours.
20. CMIPS II shall accept changes and corrections to the total needs hours by task, provided total PCSP/IPW/IHSS-R authorized hours are not exceeded.
21. CMIPS II shall calculate the need for each service based on the results of the PCSP/IPW/IHSS-R needs assessment and adjustments, pursuant to MPP 30-763.
22. CMIPS II shall calculate the individual assessed need based on the results of the PCSP/IPW/IHSS-R needs assessment and all adjustments pursuant to MPP 30-763.5.
23. CMIPS II shall track prorated PCSP/IPW/IHSS-R assessed hours for partial months.
24. CMIPS II shall track multiple PCSP/IPW/IHSS-R Recipients having the same address (companion cases).
25. CMIPS II shall calculate adjustments based on all shared living arrangements defined in MPP Sections 30-763.331, .332, .34, .352, .413, .414, .416, .421, .422, .43, .44, .45, .453, .46, and, 47.
26. CMIPS II shall provide automated assistance in calculation of Recipient total PCSP/IPW/IHSS-R assessed need including adjustments for PCSP/IPW/IHSS-R services provided from other sources such as alternative resources or voluntary services.



27. CMIPS II shall adjust the total PCSP/IPW/IHSS-R authorized hours to account for meal allowance payments pursuant to MPP 30-765.13.
28. CMIPS II shall validate that the PCSP/IPW/IHSS-R assessed time does not exceed guidelines defined by MPP 30-758.1, 30-758.11, 30-758.121, 30-758.122, 30-758.13, and 30-758.14.
29. For PCSP, CMIPS II shall validate that a personal care service has been authorized in addition to any ancillary services pursuant to MPP 30-780.1(c).
30. CMIPS II shall not allow duplication of the authorization of services in different programs (i.e. services authorized under PCSP cannot also be authorized under IHSS Residual) pursuant to MPP 30-757.1.
31. CMIPS II shall only authorize teaching and demonstration services for Domestic and Related Services, Personal Care Services, and Yard Hazard Abatement services, pursuant to MPP 30-757.18.
32. CMIPS II shall limit the authorization for teaching and demonstration services pursuant to MPP 30-757.18 through 183.
33. CMIPS II shall ensure that time limited PCSP/IPW/IHSS-R services (e.g., paramedical services) are included in the appropriate eligibility periods pursuant to MPP 30-757.19.
34. CMIPS II shall not allow authorization of PCSP/IPW/IHSS-R services prior to the date of eligibility.
35. CMIPS II shall capture, track, and display service hours at the Recipient's place of employment as a subset of total authorized service hours pursuant to W&IC §14132.955.
36. CMIPS II shall not allow authorization for service hours at the Recipient's place of employment to exceed the total PCSP/IPW/IHSS-R services hours authorized for the Recipient.
37. CMIPS II shall track and report on service hours by place of employment, in the home, and total hours.
38. CMIPS II shall capture, track and display the receipt of orders for the paramedical services, pursuant to MPP 30-757.19 and 30-757.196.
  - a. CMIPS II shall not authorize paramedical services until an order from a licensed health care professional has been entered.
  - b. Prior to the entry of orders for the paramedical services, CMIPS II shall capture the remaining PCSP/IPW/IHSS-R services of the needs assessment and authorize remaining PCSP/IPW/IHSS-R services pursuant to MPP 30-757.197.
  - c. Upon entry of the orders for paramedical services, CMIPS II shall retroactively include paramedical services in the needs assessment authorization pursuant to MPP 30-757.198.
39. CMIPS II shall identify cases that meet PCSP criteria.
40. CMIPS II shall identify cases that meet IPW criteria.
41. CMIPS II shall identify cases that meet IHSS Residual criteria.
42. CMIPS II shall determine and track whether an Applicant is Severely Impaired or Non-Severely Impaired pursuant to W&IC §12304 and MPP 30-701(s)(1) and 30-765.1.
  - a. For PCSP/IPW Severely Impaired Recipients, CMIPS II shall limit the total authorized hours pursuant to W&IC §12303.4(b), 14132.95(g), and MPP 30-765.11.



- b. For non-PCSP/IPW Severely Impaired Recipients, CMIPS II shall limit the total authorized hours pursuant to W&IC §12303.4(a), 14132.95(g), and MPP 30-765.12.
- 43. For a Severely Impaired Recipient, CMIPS II shall accept an optional selection for the advance pay option pursuant to MPP 30-769.735.
- 44. CMIPS II shall require a case activity review as defined in Paragraph 14.1.2, Case Authorization Management, before authorizing the case.
- 45. Once PCSP/IPW/IHSS-R services have been authorized, CMIPS II shall continue the authorization until there is a change in eligibility or assessed level of need pursuant to MPP 30-759.5.
- 46. CMIPS II shall display past assessments, including who has made changes to the assessment, what those changes were, and when the changes were made.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### ***11.1.3.4 Protective Supervision***

Protective Supervision is available when PCSP/IPW/IHSS-R staff determine that a twenty-four (24) hour need exists for supervision. Examples of this are mental impairment, risk of injury, and for minors. Since protective supervision is a 24-hour need, the total weekly need is always one hundred sixty-eight (168) hours. However, adjustments for shared living arrangements, alternative resources, voluntary services, and time when other PCSP/IPW/IHSS-R services are provided are applied against the total assessed need for Protective Supervision. Because of these adjustments, the Total Authorized Hours for Protective Supervision may be less than 24 hours per day.

#### **Requirement(s)**

- 1. CMIPS II shall allow adjustments for shared living arrangements, alternative resources, voluntary services, and time when other PCSP/IPW/IHSS-R services are provided to be applied against the total assessed need for Protective Supervision.
- 2. CMIPS II shall calculate protective supervision needs pursuant to MPP 30-757.17.
- 3. CMIPS II shall assign the assessed need for protective supervision to one hundred sixty-eight (168) hours per week.
- 4. CMIPS II shall not allow any unmet need for protective supervision.
- 5. CMIPS II shall calculate and process adjustments to the assessed need for protective supervision based on the following:
  - a. Shared living arrangements
  - b. Alternative resources
  - c. Voluntary services.
- 6. When multiple Recipients in the same residence require protective supervision, CMIPS II shall perform the following:
  - a. Calculate the assessed need for protective supervision as a common need
  - b. Prorate the assessed need for protective supervision among the multiple Recipients.
- 7. CMIPS II shall adjust the need for protective supervision to remove the hours that Providers are authorized to provide other PCSP/IPW/IHSS-R services.

8. CMIPS II shall calculate the need for protective supervision based on the results of the adjustments.
9. CMIPS II shall calculate the total authorized protective supervision hours per month.
10. The total authorized protective supervision hours shall be included in the total authorized hours, and tracked by CMIPS II.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **11.1.3.5     *Functional Index (FI)***

While gathering information during the interview and assessing the Applicant's ability to function in their living environment, the Social Worker ranks their functional limitations and assesses their service needs. The Social Worker ranks the Recipient's functioning on a point scale in each of fourteen (14) functional categories (housework, eating, memory, etc.). Some of these rankings are associated with twenty-five (25) tasks (domestic services, feeding, etc.). The ranks of the fourteen (14) functional categories are calculated using an automated weighted averaging process to produce a functional index score for each Recipient. While this information is critical to the assessment of the applicant, there is no direct correlation between FI rankings and the types and hours of services authorized.

#### **Requirement(s)**

1. CMIPS II shall capture, track, and display a five (5)-point scale describing the Recipient's level of functioning as defined by MPP 30-756.11 through 30-756.15.
2. CMIPS II shall capture, track, and display the Recipient's level of functioning in a minimum of fourteen (14) functions defined by MPP 30-756.2.
3. CMIPS II shall validate the user-entered rank for each function pursuant to MPP 30-756.35 and 30-756.372.
4. CMIPS II shall calculate a functional index score between one (1.00) and five (5.00) for each Recipient using the formula defined in CDSS All-County Letter No. 88-118.
5. CMIPS II shall calculate functional index hours based on the functional index score for each Recipient using the formula defined in CDSS All-County Letter No. 88-118.
6. CMIPS II shall determine impairment levels pursuant to MPP 30-701(s)(1) as defined in W&IC §12304.
7. CMIPS II shall not authorize PCSP/IPW/IHSS-R services for any function in which the Recipient ranks a one (1.00) pursuant to MPP 30-756.4 and 30-763.1.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **11.1.3.6     *Waiver Personal Care Services (WPCS)***

Welfare & Institutions Code §14132.97, (known as Assembly Bill (AB) 668 in 1998) allows the assessment and authorization of Waiver Personal Care Services (WPCS) for service eligible Recipients of Home and Community Based Services (HCBS) waivers. To qualify for personal care services under the WPCS Program, a Recipient has to be under the PCSP or the IPW, and meet the eligibility requirements.

Any interested party may submit a request for services under the WPCS waiver. IHO staff evaluate each request for Waiver Personal Care Services individually, to determine if each

Recipient meets the criteria for participation. The criteria include medical necessity, appropriateness of care, safety, and cost containment at the identified level of care.

**Requirement(s)**

1. CMIPS II shall accept authorization for additional WPCS hours for a PCSP/IPW Recipient. These hours may be above the State maximum allowable for PCSP/IPW.
2. CMIPS II shall track cases with WPCS authorized hours.
3. CMIPS II shall capture, track, and display the IHSS, PCSP, IPW and WPCS hours separately.
4. CMIPS II shall provide WPCS, PCSP and IPW paid hours and Provider data to the DHS Treatment Authorization Request (TAR) system as defined in Exhibit 6-1 SyRS - Interfaces.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

**11.1.4 Assign Modes of Service**

On granting of eligibility for PCSP/IPW/IHSS-R, the Recipient notifies the CWD of the preferred Provider Mode of Service.

PCSP/IPW/IHSS-R offers the following types of Service Delivery modes:

- Individual Provider (IP) mode - offered in all Counties
- County Contract (CC) mode - offered in some Counties
- Homemaker Mode (HM) - offered in some Counties

If the Recipient selects the Individual Provider (IP) mode and does not have a Provider selected, the CWD refers the Recipient to the County Public Authority (PA) or equivalent. The PA or equivalent maintains a registry of available Providers. The PA or equivalent provides a registry service for the Recipient. Once the Recipient has selected a Provider, the Recipient notifies the CWD. The CWD PCSP/IPW/IHSS-R staff enters Provider information in CMIPS II. If applicable, CMIPS II generates a PCSP/IPW enrollment form to be mailed to the Provider.

If the Recipient selects County Contractor, CWD PCSP/IPW/IHSS-R staff enters the selection in CMIPS II. CMIPS II sends the appropriate Recipient data electronically to the County Contractor as described in Exhibit 6-1 SyRS - Interfaces. The County Contractor contacts the Recipient and schedules PCSP/IPW/IHSS-R services.

If the Recipient selects the County Homemaker mode or circumstances dictate the need for County Homemaker mode of service, the CWD PCSP/IPW/IHSS-R staff notes the selection in CMIPS II, and appropriate data is made available to the Homemaker Supervisor. The Homemaker Supervisor assigns a Homemaker and PCSP/IPW/IHSS-R services are scheduled.

Circumstances or Recipient needs can require more than one service delivery mode per Recipient. This is referred to as a “mixed mode” case.

A single county can offer all three (3) modes of service. A single county may also have contracts with one or more County Contractors at any one time.

**Requirement(s)**

1. CMIPS II shall allow the user to select the service delivery mode (IP, CC, HM) for each Recipient.
2. CMIPS II shall accommodate mixed mode Providers. A case is mixed mode when a Recipient is receiving PCSP/IPW/IHSS-R services through more than one delivery mode.
3. CMIPS II shall establish and maintain a link between a Recipient and his/her Provider(s).
4. CMIPS II shall accept changes to the mode of service delivery at the beginning of the following month, mid-month, or when circumstances require a delivery method change pursuant to MPP 30-767.133.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

**11.1.4.1 Individual Provider (IP)**

The Recipient selects and hires the Individual Provider and notifies the CWD PCSP/IPW/IHSS-R office of the selection along with pertinent Provider data. CWD PCSP/IPW/IHSS-R staff enter the applicable information in CMIPS II and link the Recipient to the Provider. Additional information is available in Paragraph 13, Provider Management.

**Requirement(s)**

1. CMIPS II shall automatically update a Provider's record when a relevant change is made to a linked Recipient's eligibility or status.
2. CMIPS II shall accommodate multiple Individual Providers for each Recipient.
3. CMIPS II shall accommodate the use of PCSP/IPW/IHSS-R Providers as WPCS Providers.
4. Upon Recipient selection of an Individual Provider that was not referred by a Public Authority, CMIPS II shall report the Individual Provider to the Public Authority via an interface in accordance with W&IC §12301.6.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

**11.1.4.2 County Contractor (CC) Provider**

In addition to the Individual Provider mode, some Counties contract with independent agencies to provide PCSP/IPW/IHSS-R services. In the County Contract mode, the County Contractor hires and dispatches workers. The Providers are employees of the Contractor, with wages and benefits determined through collective bargaining. In addition to Provider recruitment, training, screening, assigning, scheduling, and supervision, the County Contractors are required to maintain a sufficient workforce to meet Recipient needs.

Upon a determination the PCSP/IPW/IHSS-R Recipient intends to use the County Contractor, the Social Worker indicates the Contractor mode of service in CMIPS II, and CMIPS II provides the information to the County Contractor via an interface. The Contractor contacts the Recipient, schedules PCSP/IPW/IHSS-R services, and provides PCSP/IPW/IHSS-R services to the Recipient.

**Requirement(s)**

1. CMIPS II shall accept the assignment of the number of authorized hours to the County Contractor mode.

2. CMIPS II shall not accept assigned County Contractor hours in excess of the Recipient's total authorized hours.
3. CMIPS II shall provide necessary data to County Contractors as described in Exhibit 6-1 SyRS - Interfaces.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **11.1.4.3     *Homemaker (HM) Provider***

Homemaker Providers are County employees, hired in accordance with established County civil service requirements. Homemaker wages and benefits are determined through County collective bargaining.

When it is necessary to use a County employee Homemaker to provide PCSP/IPW/IHSS-R services to a Recipient, the Social Worker enters a request for homemaker mode of service in CMIPS II.

##### **Requirement(s)**

1. CMIPS II shall accept requests for homemaker mode of service.
2. CMIPS II shall allow for appropriate data to be made available to the Homemaker Supervisor to assist in assignment of the Homemaker.
3. CMIPS II shall produce, for the Homemaker Supervisor, a case event as defined in Paragraph 14.1.1, Case Event Management, upon request for homemaker mode of service.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **11.1.4.4     *Establish Hours***

After the Recipient has selected the mode of service, hired the Individual Provider if applicable, and notified the CWD, and after PCSP/IPW/IHSS-R staff have linked the Provider to the Recipient, CMIPS II links authorized hours to the Provider and the Recipient.

##### **Requirement(s)**

1. CMIPS II shall accept the assignment of authorized hours to a selected Provider.
2. CMIPS II shall accept pro-rations and adjustments to authorized PCSP/IPW/IHSS-R services and hours between multiple Providers and multiple modes of service.
3. For each Recipient, CMIPS II shall track the total assessed need, adjustments, alternative resources and authorized PCSP/IPW/IHSS-R services and hours.
4. When all of the authorized hours have not been assigned to Providers, CMIPS II shall notify the user of the remaining hours.
5. When a change in a Recipient's authorized hours occurs, on appropriate user approval, CMIPS II shall adjust the authorized hours for each linked Provider accordingly.
6. CMIPS II shall accept changes and corrections to CMIPS II adjustment of authorized PCSP/IPW/IHSS-R services and hours for each Provider.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **11.1.5 Final Determination**

Upon completion of the identification of Status Eligibility, receipt of the Income Eligibility, completion of the PCSP/IPW/IHSS\_R Needs Assessment, Assignment of Modes of Service, and completion of the Provider PCSP/IPW/IHSS-R Eligibility Processes, the Social Worker determines and enters the authorized PCSP/IPW/IHSS-R services and approves the case or denies the case in CMIPS II.

Funding for payment of Providers for Recipient services is from three Programs: PCSP, IPW, and IHSS Residual. Funding is determined by different sets of criteria for PCSP, IPW and IHSS Residual based on the services authorized and the relationship of the Provider to the Recipient and the Recipient's citizenship status. CMIPS II determines the funding based on the identified criteria and determines the Funding Program Aid Code (PCSP, IPW, or IHSS Residual).

If the Applicant is determined to be service eligible for PCSP/IPW/IHSS-R, the Social Worker completes the review of the case file information and, in CMIPS II, marks the case as ready for supervisory review. CMIPS II allows for the indication of ready for case review and produces a case event. The Social Worker Supervisor receives the case event of the need for review, reviews the case record online, indicates necessary changes, or approves the case. CMIPS II produces case events indicating the Supervisor's actions.

CMIPS II notifies the appropriate SAWS system of the final eligibility for PCSP/IPW/IHSS-R services (yes or no), the Share of Cost, the authorization date, final PCSP/IPW/IHSS-R eligibility status, and beginning PCSP/IPW/IHSS-R services or case termination date. The SAWS system notifies the MEDS system of the new PCSP/IPW/IHSS-R case via an automated interface.

#### **Requirement(s)**

1. Upon completion of the Status Eligibility, Medi-Cal and IHSS Income Eligibility, Needs Assessment, Assign Modes of Service, and Provider Eligibility Processes, CMIPS II shall allow the Social Worker to enter the final PCSP/IPW/IHSS-R eligibility and authorized PCSP/IPW/IHSS-R services or deny the case in CMIPS II.
2. CMIPS II shall allow for the indication of "ready for case review" and produce a case event.
3. CMIPS II shall produce subsequent case events indicating the Supervisor's actions.
4. CMIPS II shall calculate the cost of PCSP/IPW/IHSS-R services.
5. CMIPS II shall compare the Share of Cost to the cost of PCSP/IPW/IHSS-R services and determine PCSP/IPW/IHSS-R eligibility. If the Share of Cost exceeds the cost of PCSP/IPW/IHSS-R services, CMIPS II shall notify the user.
6. CMIPS II shall accept authorization for the Recipient to receive PCSP/IPW/IHSS-R services.
7. CMIPS II shall determine PCSP/IPW/IHSS-R funding eligibility based upon the results of the needs assessment, the Medi-Cal and IHSS income eligibility, the Provider eligibility, CDSS All-County Letter No: 99-25, W&IC 12305.1 and 14132.95, MPP 30-757, DHS Regulations Section 51181, and MPP 30-767.4 and criteria established in the IHSS Plus Waiver.
8. CMIPS II shall notify the appropriate SAWS application of the final service eligibility determination information.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_ NO \_\_\_\_\_



## **11.2 Case Maintenance**

The Case Maintenance function encompasses the ongoing maintenance processes, and allows the CWD to continue providing PCSP/IPW/IHSS-R services to a Recipient. The Case Maintenance component includes the following functions: Annual Reassessment, Update Recipient Data, Inter-County Transfers, Appeals, and Recipient Termination of PCSP/IPW/IHSS-R services.

### **11.2.1 Reassessments and Renewals**

The Social Worker reassesses Recipients for PCSP/IPW/IHSS-R services on a yearly basis, a pre-defined interval basis, or whenever the Recipient's physical/mental condition or living/social situation has changed. The Social Worker schedules an in-home visit and performs the PCSP/IPW/IHSS-R needs assessment. On return to the office, the Social Worker updates CMIPS II with the information that has changed. If the Social Worker encounters evidence of a change of financial circumstances that could require a Medi-Cal income eligibility re-determination, the Social Worker requests that a Medi-Cal income eligibility re-determination request be sent to the appropriate SAWS system via the interface between SAWS and CMIPS II.

The Social Worker completes review of the case file information and marks the case as ready for supervisory review. The Social Worker Supervisor receives notification of the need for review, reviews the case record online, indicates necessary changes, or approves the case for PCSP/IPW/IHSS-R services. The Social Worker is notified of required actions. CMIPS II generates appropriate documents for mailing.

#### **Requirement(s)**

1. CMIPS II shall accept a PCSP/IPW/IHSS-R reassessment at any time pursuant to MPP 30-755.21, 30-761.213, and W&IC §12301.1.
2. CMIPS II shall produce case events for PCSP/IPW/IHSS-R reassessment dates as defined in Paragraph 14.1.1, Case Event Management, following the rules defined in MPP 30-761.212 and 30-767.212(a).
3. CMIPS II shall produce a case event as well as track and report PCSP/IPW/IHSS-R reassessments due based on pre-defined criteria for interval reassessments pursuant to W&IC §12301.1
4. CMIPS II shall accept a new PCSP/IPW/IHSS-R assessment based on data and values from the previous needs assessment, pursuant to MPP 30-761.28.
5. CMIPS II shall accept a request for Medi-Cal income eligibility re-determination and shall send the request to the appropriate County SAWS system.
6. CMIPS II shall receive income eligibility re-determinations from the SAWS system and produce a case event as defined in Paragraph 14.1.1, Case Event Management.
7. CMIPS II shall require a case activity review as defined in Paragraph 14.1.2, Case Authorization Management, before approving the case for PCSP/IPW/IHSS-R services.
8. Any change in service hours or authorized PCSP/IPW/IHSS-R services shall initiate the corresponding change in the Provider authorization.
9. If the Recipient has multiple Providers, CMIPS II shall perform the following:
  - a. Adjust the Provider hours based on the existing pro-ration



- b. Generate a case event for the user to validate or change the pro-rated hours.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **11.2.2 Update Recipient Data**

Upon receiving notification of a change, CWD PCSP/IPW/IHSS-R staff enter the Recipient data changes in CMIPS II. CMIPS II, via the interface, notifies the appropriate SAWS system of the Recipient changes.

#### **Requirement(s)**

1. CMIPS II shall produce a case event as defined in Paragraph 14.1.1, Case Event Management, upon any of the following changes:
  - a. Recipient's physical address
  - b. Recipient's address matches one of the Recipient's Provider's addresses
  - c. Recipient's birth date
  - d. Recipient's SSN.
2. CMIPS II shall provide updates to the appropriate SAWS system of Recipient demographics, address, and status changes.
3. Upon a change to any of the following Recipient information, CMIPS II shall provide an update to the SCI:
  - a. SSN
  - b. Name
  - c. Date of Birth
  - d. Gender.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **11.2.2.1 Updates from Statewide Client Index (SCI)**

SCI provides daily updates of Recipient information. CMIPS II processes the SCI updates and updates the Recipient information.

#### **Requirement(s)**

1. CMIPS II shall accept Recipient information changes from SCI, including but not limited to the following:
  - a. CIN
  - b. County
  - c. SSN
  - d. Date of Birth
  - e. Gender
  - f. Name
  - g. Death.
2. If the change is CIN only, CMIPS II shall apply the change.
3. If the change is any information other than CIN, CMIPS II shall perform the following:

- a. Update the Recipient information
- b. Display the existing and change information
- c. Produce a case event.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **11.2.2.2 Updates from MEDS**

MEDS notifies CMIPS of changes to or discrepancies in IHSS recipient data by means of MEDS Alert Files. For example, MEDS creates an alert when MEDS is notified of a deceased recipient. MEDS also creates an alert file for data discrepancies encountered during the MEDS Reconciliation process.

1. CMIPS II shall accept and process alerts received via the MEDS Alert interface.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **11.2.3 Inter-County Transfers**

Upon receiving notification that a Recipient has moved or is moving to another County, the transferring County prepares the electronic case file in CMIPS II for transfer to the receiving County.

On verification of the Recipient's residency, the receiving County notifies the transferring County. The transferring County marks the electronic case file for release for transfer to the receiving County on a specified date. The receiving County begins the Initiation process. CMIPS II provides for automated assistance in termination/closure of the case in the transferring County's SAWS systems and the initiation of the case in the receiving County's SAWS system. There should be no disruption of Recipient PCSP/IPW/IHSS-R services during this transition period. Electronic case record information is available to both Counties during the transfer process time, as security levels allow.

##### **Requirement(s)**

1. CMIPS II shall provide for automated assistance in termination of the case in the transferring County's SAWS system and the initiation of the case in the receiving County's SAWS system without disruption of Recipient's PCSP/IPW/IHSS-R services.
2. CMIPS II shall prevent interruption or overlapping of PCSP/IPW/IHSS-R services as the result of a Recipient moving from one County to another pursuant to MPP 30-759.92.
3. Upon the transferring County's initiation of an inter-county transfer, CMIPS II shall generate a referral to the receiving County pursuant to MPP 30-759.91.
4. Upon initiation of an inter-county transfer, CMIPS II shall update the case to reflect a pending transfer.
5. CMIPS II shall capture, track, and display the transferring County's original date of notification and the receiving County's notification of transfer pursuant to MPP 30-759.91 and MPP 30-759.93.
6. If the transfer has not been completed within thirty (30) days, CMIPS II shall accept an optional comment on the transfer status.
7. CMIPS II shall display all case information to the receiving County users pursuant to MPP 30-759.911.

8. CMIPS II shall accept a cancellation of a transfer and reinitiating of the same transfer to either the same or a different County, pursuant to MPP 30-759.922.
9. If the Applicant has not yet been approved for PCSP/IPW/IHSS-R services at the time of the inter-county transfer initiation, the case shall not be transferred until the case has been authorized pursuant to MPP 30-759.97.
10. CMIPS II shall accept the user's validation of the Recipient's new address.
11. Upon transfer, CMIPS II shall reassign the case record to the receiving County pursuant to MPP 30-759.921.
12. CMIPS II shall accept a PCSP/IPW/IHSS-R Needs Assessment during the transfer process, pursuant to MPP 30-759.94 and 30-759.941.
13. If the case is terminated during the transfer period, the inter-county transfer shall be cancelled pursuant to MPP 30-759.95.
14. If a case is appealed during the transfer period, the inter-county transfer shall not be completed prior to the hearing decision pursuant to MPP 30-759.96.
15. Upon completion of a transfer, CMIPS II shall provide notification of closure to the transferring County's SAWS system.
16. Electronic case record information shall be available to both Counties during the transfer process time.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **11.2.4 State Hearings/Appeals**

Any Recipient dissatisfied with a County action has the right to appeal at a State Hearing as described in CDSS MPP 22-000 State Hearing and in W&IC §10950-10967. The appeal has to be submitted within ninety (90) days of the date of the action or inaction. Recipients can submit an oral or written request to the CWD or to the CDSS State Hearings Division. The Hearing is conducted by an Administrative Law Judge (ALJ). All State Hearings are decided or dismissed within ninety (90) days from the date of the request. After closure of the State Hearing the Administrative Law Judge submits a proposed decision to the Chief Administrative Law Judge and CDSS Director, or adopts a final decision pursuant to the authority delegated to the ALJ by the Director. On adoption of the final decision, a copy is mailed to the claimant and the County.

##### **Requirement(s)**

1. CMIPS II shall identify, capture, track, and display the status of State hearing cases for PCSP/IPW/IHSS-R cases.
2. CMIPS II shall track PCSP/IPW/IHSS-R service payments made pending a State hearing decision separately from other service payments pursuant to MPP 30-768.111.
3. CMIPS II shall track the outcome, any pay adjustments and any legal determination regarding PCSP/IPW/IHSS-R status eligibility ordered as a result of a hearing.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **11.2.5 Recipient Terminations**

Recipient terminations may occur for a variety of reasons, including Recipient request, changes in circumstances, changes in eligibility, denial of PCSP/IPW/IHSS-R services, and appeals.

**Requirement(s)**

1. Upon any user request for Recipient termination, CMIPS II shall notify the appropriate SAWS system of the PCSP/IPW/IHSS-R termination.
2. Upon any user request for Recipient termination, CMIPS II shall notify the SAWS system and request a Medi-Cal eligibility re-determination pursuant to W&IC §14005.32 and 14005.37.
3. CMIPS II shall not terminate the Recipient until confirmation of Medi-Cal re-determination is received or entered pursuant to W&IC §14005.32 and 14005.37.
4. CMIPS II shall terminate any case in CMIPS II with a reason for the termination.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

**11.2.5.1      *Application Withdrawn/Denied***

If an Applicant is determined to be service ineligible for PCSP/IPW/IHSS-R during the Application Process, or the Applicant voluntarily withdraws his/her application, the Social Worker updates the electronic case record with reason for withdrawal or denial and indicates the case is ready for supervisory review before closure/termination of PCSP/IPW/IHSS-R services. CMIPS II notifies the Social Worker Supervisor that the case is ready for review.

**Requirement(s)**

1. Upon withdrawal of application or denial of PCSP/IPW/IHSS-R services, CMIPS II shall generate a case event for the Social Worker Supervisor as defined in Paragraph 14.1.1, Case Event Management.
2. Upon supervisory approval of withdrawal of application or denial of PCSP/IPW/IHSS-R services, CMIPS II shall update the Recipient status.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

**11.2.5.2      *Termination of PCSP/IPW/IHSS-R Services***

On determination to close/terminate a PCSP/IPW/IHSS-R case, the Social Worker completes a review of the case file information and marks the case as ready for supervisory review. The Social Worker Supervisor receives notification of the need for review, reviews the case record online, indicates necessary changes, or approves the case for closure. The Social Worker is notified of required actions. CMIPS II, via the interface, notifies the appropriate SAWS system of the termination of PCSP/IPW/IHSS-R services. The Social Worker closes and archives the physical case file.

**Requirement(s)**

1. CMIPS II, via the interface, shall notify the appropriate SAWS system of termination of Recipient's PCSP/IPW/IHSS-R services.
2. CMIPS II shall rescind PCSP/IPW/IHSS-R Recipient terminations.
3. CMIPS II shall receive the Social Security Administration death notifications from an interface with DHS.
4. Upon notification of death, CMIPS II shall perform the following:
  - a. Track the Recipient case as a potential termination

- b. Produce a case event for user validation.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **12 PAYROLL REQUIREMENTS**

### **Requirement(s)**

1. The payroll function of CMIPS II shall provide for the authorization and issuance of warrants for compensation of PCSP/IPW/IHSS-R and WPCS services provided by Individual Providers, and the authorization and issuance of the Advance Pay and Restaurant Meal Allowance warrants to Recipients.
2. CMIPS II shall compute PCSP/IPW/IHSS-R and WPCS hours and payments, calculate and prepare all employer tax forms and reports, and pay government entities.
3. CMIPS II shall provide an audit trail for each payment for PCSP/IPW/IHSS-R and WPCS services with the capability to identify and/or group audit information by either the source or destination of payments such as the Recipient, Individual Providers, CWDs, CDSS, Unions, IRS, and EDD, etc.
4. The payroll component of CMIPS II shall include Individual Provider Payroll, Warrant Management, and Provider Pay Rate Management components.
5. CMIPS II shall capture, track, and display all data in Payroll records required for the user to perform the Payroll business functions.
6. CMIPS II shall accurately and timely process all payments.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **12.1 Restaurant Meals Allowance**

Qualified Recipients can elect to receive a monthly allowance for restaurant meals in place of meal preparation, related cleanup, and shopping for food services. The restaurant meals allowance is not reportable income, and is not included in determining contribution and tax thresholds.

#### **Requirement(s)**

1. For every Recipient authorized to receive the Restaurant Meal Allowance, CMIPS II shall include separate restaurant meal warrants on the payroll tape a minimum of twice per month.
2. The amount of the Restaurant Meal Allowance allowed in CMIPS II for each Recipient shall be that specified in MPP 30-757.134 (a) (1) (A) or as otherwise provided by law pursuant to W&IC §12303.7.
3. CMIPS II shall include restaurant meals payments on the electronic tape claim sent to SCO as described in Paragraph 12.2.4.2, Warrant and Timesheet Tape.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **12.2 Individual Provider Payroll**

#### **Requirement(s)**

1. The Individual Provider Payroll function of CMIPS II shall encompass all payroll processes for an Individual Provider.

- a. CMIPS II shall allow the CWD staff to authorize payment for PCSP/IPW/IHSS-R services performed by an Individual Provider.
  - b. CMIPS II shall allow DHS IHO staff to authorize payment for WPCS services performed by an Individual Provider.
2. The Individual Provider Payroll subcomponent shall include the following functions: Time and Attendance, Arrears Payments, Advance Payments, Waiver Personal Care Services Payments, Payroll Management, Tax and Contribution Management, and Deduction Management.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **12.2.1 Time and Attendance**

#### **Requirement(s)**

1. The Time and Attendance function of CMIPS II shall allow CMIPS II to capture and record payroll information. This function shall include the following processes: Issue Timesheet, Time Entry, and Timesheet Errors.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **12.2.1.1 Issue Timesheet**

PCSP/IPW/IHSS-R staff enter Individual Provider information into CMIPS II. CMIPS II produces all initial timesheets for mailing to the Provider. Additionally, CMIPS II produces all subsequent WPCS and Advance Pay timesheets for mailing to the Provider. The State Controller's Office (SCO) produces and mails all arrears timesheets.

#### **Requirement(s)**

1. CMIPS II shall produce one (1) timesheet record per Provider-Recipient relationship per pay period for arrears pay cases and send this information with warrant data to SCO.
2. CMIPS II shall produce monthly WPCS timesheets per Recipient, per Provider, for each Recipient who has been authorized WPCS services.
3. CMIPS II shall produce one advance pay timesheet per month per Provider per Recipient within two (2) business days after the fifteenth (15th) of the month for advance pay cases.
4. Timesheets produced by CMIPS II shall be preprinted with all required information, including but not limited to those items identified in Artifact 7 - Information Groupings, located in the Bidder's Library.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **12.2.1.1.1 Initial Timesheets**

After the Recipient has hired the Provider, and PCSP/IPW/IHSS-R staff have updated the Provider information in CMIPS II, PCSP/IPW/IHSS-R staff request an initial timesheet be issued by CMIPS II. The new Individual Provider uses the initial timesheet for the first pay period. PCSP/IPW/IHSS-R staff may also request that CMIPS II generate more than one (1) initial timesheet and/or a timesheet with an alternate starting date.

**Requirement(s)**

1. Upon authorization of services and assignment of a Provider, CMIPS II shall automatically produce an initial timesheet for the first authorized pay period.
2. Upon the user's request, CMIPS II shall produce an initial timesheet with the Provider and Recipient information, and pay period.
3. CMIPS II shall accept a single request for timesheets covering multiple pay periods.
4. CMIPS II shall produce and print the initial timesheets for mailing to the Provider.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

**12.2.1.1.2 Replacement Timesheets**

Upon notification that a Recipient or Individual Provider has not received or has lost the timesheet, PCSP/IPW/IHSS-R staff can request a replacement timesheet be issued by CMIPS II.

**Requirement(s)**

1. Upon the user's request, CMIPS II shall produce initial and/or replacement timesheets.
2. CMIPS II shall include, on the initial or replacement timesheet, the same information as the regular timesheet.
3. CMIPS II shall produce the initial and/or replacement timesheet for the second time period to include the total monthly authorized service hours and the remaining (unpaid) authorized hours for the second time period.
4. CMIPS II shall accept a single request for initial and/or replacement timesheets covering multiple pay periods.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

**12.2.1.2 Time Entry**

Upon providing services to the Recipient, the Individual Provider reports the hours worked and signs the timesheet. The Recipient verifies the hours worked and signs the timesheet. The Individual Provider then delivers the timesheet to the timesheet processing location.

**12.2.1.2.1 Receive Timesheet**

The timesheet processing location receives timesheets from each Individual Provider for every pay period. The majority of the timesheets are received within the first three (3) business days after the end of the payroll period.

**Requirement(s)**

1. CMIPS II shall support an audit process to ensure that all timesheets received are processed.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

**12.2.1.2.1.1 Receive Legacy CMIPS Timesheet**

During statewide implementation of CMIPS II and for some time period thereafter, it is anticipated that the Legacy CMIPS timesheets will be sent to the County IHSS offices for processing; however some timesheets may inadvertently be sent to the Contractor Timesheet



processing facility. The Contractor will process these timesheets as described in Section 6 SOW, Paragraph 4.6.3.7.1, Legacy CMIPS Timesheet Processing Services.

**Requirement(s)**

1. CMIPS II shall support an audit process to ensure that all Legacy CMIPS timesheets received at the Contractor Timesheet processing facility after implementation of CMIPS II are processed.
2. CMIPS II shall allow for county staff to enter Legacy CMIPS timesheet data for payroll processing.
3. CMIPS II shall support the process identified in Section 6 SOW, Paragraph 4.6.3.7.1, Legacy CMIPS Timesheet Processing Support.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

**12.2.1.2.2 Capture Timesheet Data**

**Requirement(s)**

1. CMIPS II shall accept all information entries on the timesheet, including but not limited to the following:
  - a. Identifiers
  - b. Daily hours
  - c. Total hours
  - d. Address change
  - e. Signatures.
2. CMIPS II shall accept and manage manual entry via key data entry for timesheets that cannot be processed via the Automated Timesheet Entry function.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

**12.2.1.2.3 Capture Timesheet Image**

**Requirement(s)**

1. The Automated Timesheet Entry function shall capture an unalterable image of each timesheet (front and back) as defined in California Government Code §12168.
2. The Automated Timesheet Entry function shall manage all timesheet images and make them available to County offices within one (1) business day of input.
3. CMIPS II shall allow the user to search and filter timesheet images, including but not limited to, by Recipient, by Provider, by case, by pay period, or combination of each.
4. The Automated Timesheet Entry function shall support identification and processing of different timesheets such as WPCS, Advance Pay, and Individual Provider timesheets.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **12.2.1.2.4 Verify Timesheet**

##### **Requirement(s)**

1. CMIPS II shall verify all timesheets for valid hours, consistency, completeness, and accuracy.
  - a. CMIPS II shall capture both the daily and total hours from the timesheet.
  - b. CMIPS II shall total the daily hours and compare the system-calculated total hours to the Provider-entered total hours. If total hours are inconsistent, the timesheet is considered invalid and shall be processed as described in Paragraph 12.2.1.3, Timesheet Errors.
2. CMIPS II shall validate that both Provider and Recipient signatures exist on the timesheet image. If either signature does not exist, the Automated Timesheet Entry function shall not process the timesheet. The timesheet is considered invalid and shall be processed as described in Paragraph 12.2.1.3, Timesheet Errors. It is not the intent of this requirement that each signature is verified as accurate against a signature on file but that each signature block is not blank.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **12.2.1.2.5 Timesheet Payroll Processing**

##### **Requirement(s)**

1. CMIPS II shall accept entry of payroll hours on a current and retroactive basis.
2. CMIPS II shall accept payroll entry of hours worked in the following formats, at a minimum:
  - a. Daily
  - b. Weekly Total
  - c. Bi-Weekly Total
  - d. Semi-Monthly Total
  - e. Monthly Total.
3. CMIPS II shall accept hours and fractions to be recorded to one (1) decimal place.
4. CMIPS II shall provide automated edits and audits of payroll data to allow users to correct errors as described in Paragraph 7.5, User Interface.
5. CMIPS II shall accept deletions, corrections, and changes to time entry prior to payroll calculation.
6. CMIPS II shall not accept time entry for future hours.
7. CMIPS II shall not accept any time entry prior to the Individual Provider start date.
8. CMIPS II shall not accept more than one (1) time entry per pay period per Provider-Recipient relationship.
9. CMIPS II shall ensure that duplicate timesheets are not processed.
10. CMIPS II shall not accept any time entry for dates during which either the Individual Provider or the Recipient is on leave or terminated.
11. CMIPS II shall validate that the total authorized hours per Provider, per Recipient, and per Provider-Recipient relationship are not exceeded for any pay period.

12. For semi-monthly payroll, CMIPS II shall validate that a percentage, to be determined by the State, of the total authorized monthly hours per Recipient are not exceeded for the first pay period in the month.
13. For semi-monthly payroll, CMIPS II shall accept overrides, changes, and corrections to hours worked in excess of a percentage, to be determined by the State, of the total authorized hours in the first pay period in the month.
14. CMIPS II shall track all timesheets from the time of receipt to final resolution for audit purposes and provide reports of the status, e.g., Entered, Paid, Errored.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **12.2.1.3 Timesheet Errors**

Individual Providers submit signed timesheets to the timesheet processing location. After timesheet information is captured, CMIPS II edits and validates entries to ensure against erroneous payments. Appropriate State or County staff are notified of any errors and, upon notification, begin the error resolution process.

#### **Requirement(s)**

1. CMIPS II shall edit and validate the timesheet entries to ensure against erroneous payments.
2. For timesheets that could be imaged, but cannot complete processing due to errors or inconsistencies, CMIPS II shall notify the applicable County or State staff of all timesheet errors and provide the image of the problem timesheet within four (4) business hours of discovery. Examples of this type error include, but are not limited to, the following:
  - a. No Provider signature on timesheet
  - b. No Recipient signature on timesheet
  - c. Timesheet hours worked are over authorized hours.
3. CMIPS II shall link an erred timesheet image with a corrected one.
4. CMIPS II shall allow corrections to previously entered time data prior to the data being processed to generate a warrant.
5. CMIPS II shall, through the application of rules and procedures, identify errors at the earliest possible time and provide notice of all known defects to the applicable County.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **12.2.2 Advance Payments**

A qualified severely impaired IPW/IHSS-R Recipient who utilizes the Individual Provider mode of service may request advance payment for Provider services. (Advance pay Recipients are not service eligible for PCSP.) Authorization for Advance Payment, when entered into CMIPS II, results in an Advance Payment Warrant being issued and mailed to the Recipient. At the time the advance pay is calculated, CMIPS II calculates and records an "Advance Pay Withholding Estimate" for employment taxes (FICA, FUTA, Medicare, SDI, SUI, ETT) based on the assumption that there is one employee; Federal and State income taxes are not withheld for Advanced Payments as defined in Paragraph 12.2.5, Tax and Contribution Management. The warrant amount is for an advancement of funds to use for payment of IPW/IHSS-R services, less the employee portion of FICA, Medicare, SDI and Share of Cost. Note that the remaining estimated employment taxes (employer portion of FICA, Medicare along with SUI and ETT) are

paid after a reconciling timesheet is received from the provider(s). One advance pay warrant is issued to the Recipient regardless of the number of Providers providing services to that Recipient.

The Recipient then pays the Individual Providers. The Individual Provider(s) report the hours worked and sign the timesheets. The Recipient verifies and signs the timesheet(s). The Individual Provider(s) then send the timesheet to the timesheet processing location. Once the timesheet is received and the information is input, CMIPS II determines new estimate for the taxes based on the hours reported on the timesheet and the recipient/provider relationship. CMIPS II compares the new tax estimate to the amount withheld from the Advance Pay warrant as described Paragraph 12.2.4.1.2, Advance Pay Reconciliation. CMIPS II processes those tax payments in the next quarterly cycle as defined in Paragraph 12.2.5, Tax and Contribution Management. Once all the timesheets for an individual recipient are received, CMIPS II compares the actual hours worked to the authorized hours as defined in Paragraph 12.2.4.1.2, Advance Pay Reconciliation. Finally the original “Advance Pay Withholding Estimate” must be reconciled with the actual wages, taxes, and any adjustments. There is no time limit to clear advance pay liabilities “off the books.” If an advance pay timesheet is received in a following quarter or calendar year, all payroll and tax reporting must be appropriately updated.

After processing the timesheet, the Contractor mails earning statements with subsequent timesheets to the Individual Provider(s). The Contractor mails Advance Pay timesheets monthly to the identified Providers(s) even if the previous month’s completed timesheet has not been returned.

#### **Requirement(s)**

1. CMIPS II shall facilitate necessary monthly reconciliation of advance payments and received timesheets as defined in Paragraph 12.2.4.1.2, Advance Pay Reconciliation. Reconciliation reports shall be generated by CMIPS II and distributed to the CWD.
2. CMIPS II shall process advance payments to the Recipients based on the total authorized hours pursuant to MPP 30-769.73 and W&IC §12304.
3. CMIPS II shall withhold taxes for advance payments to the Recipient as defined in Paragraph 12.2.5, Tax and Contribution Management, item 3.
4. CMIPS II shall withhold Share of Cost from advance payments as defined in Paragraph 12.2.4.1.1, Share of Cost.
  - a. CMIPS II shall process a MEDS renewal file and deduct the reported Share of Cost for advance pay recipients towards the end of each month.
  - b. For advance pay recipients with a Medi-Cal Share of Cost, CMIPS II shall spend down the Share of Cost balance via an interface with MEDS.
5. CMIPS II shall include advance payments on the electronic tape claim sent to SCO as described in Paragraph 12.2.4.2, Warrant and Timesheet Tape.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **12.2.3 WPCS Payments**

Qualified WPCS Recipients may receive Waiver Personal Care Services in addition to services under the Personal Care Services Program. Recipients may hire different Individual Providers or

use their PCSP/IPW Individual Provider. IPs record waiver services on separate timesheets and submit the waiver timesheets to the timesheet processing location for entry into the CMIPS II system.

**Requirement(s)**

1. CMIPS II shall process the waiver payroll payments along with the daily payroll.
2. CMIPS II shall accept time entry for WPCS payments only for cases that have been authorized WPCS.
3. CMIPS II shall process WPCS payment for hours worked in addition to the PCSP/IPW hours.
4. CMIPS II shall capture, display, and track WPCS hours and payments separately from total authorized PCSP/IPW/IHSS-R hours and payments.
5. CMIPS II shall include WPCS payments on the electronic tape claim sent to SCO as described in Paragraph 12.2.4.2, Warrant and Timesheet Tape.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

**12.2.4 Payroll Management**

**Requirement(s)**

1. The Payroll Management function shall include the Payroll Calculation and the Warrant and Timesheet Tape processes for Individual Providers.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

**12.2.4.1 Payroll Calculation**

**Requirement(s)**

1. On a daily basis, CMIPS II shall process payroll for all entered timesheets. CMIPS II shall accurately calculate the gross payroll, subject wages, taxable wages, all deductions, all taxes, and net payroll.
2. CMIPS II shall calculate payments as defined by MPP 30-764.1.11.
3. CMIPS II shall calculate regular gross pay by multiplying hours worked by the Individual Provider's hourly rate.
4. CMIPS II shall accept specific hourly rates for Individual Providers for computation of gross pay.
5. CMIPS II shall compute and validate net pay based on gross pay minus withholdings.
6. CMIPS II shall determine gross and net advance payments pursuant to W&IC §12304 (b) and MPP 30-769.731.
7. CMIPS II shall process additional payments due to changes in time, salary, or gross pay for any earning type.
8. CMIPS II shall allow authorized users to cancel an erroneous payment, and correct payment and deduction history.
9. CMIPS II shall calculate payroll immediately for discharged Individual Providers, pursuant to California Labor Code §201.

10. CMIPS II shall calculate payroll within seventy-two (72) hours upon notification for Individual Providers who quit, pursuant to California Labor Code §202.
11. CMIPS II shall include payments for discharged Individual Providers and those who quit on the electronic tape claim sent to SCO as described in Paragraph 12.2.4.2, Warrant and Timesheet Tape.
12. CMIPS II shall determine the overtime pay rate associated with approved overtime hours for payment.
  - a. CMIPS II shall allow for the authorized user to indicate the approval of overtime hours.
  - b. CMIPS II shall allow for the authorized user to indicate the number of overtime hours approved.
13. CMIPS II shall determine overtime based upon Federal law and the authorized services and the Recipient/Provider relationship.
14. CMIPS II shall calculate overtime on the payroll period using the hours worked.
15. CMIPS II shall have the functionality to support the disabling or enabling of the overtime calculation functionality.
16. CMIPS II shall validate payments to ensure that there are no duplicate payments.
17. CMIPS II shall validate that all deductions are for the correct amount.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_ NO \_\_\_\_\_

#### **12.2.4.1.1 Share of Cost**

Some Recipients qualify for PCSP/IPW/IHSS-R services with a "Share of Cost." The Recipient pays this Share of Cost amount directly to the Provider in most cases, with the exception of the Homemaker Mode of service. The Homemaker Mode requires the Share of Cost to be paid to the Counties.

The Recipient can, and sometimes does, pay the Share of Cost to the County, in which case the Provider receives full pay through CMIPS pursuant to MPP 30-755.233(b) 1-2. When the Individual Provider mode of service is used and the recipient pays the Share of Cost directly to the Provider, the PCSP/IPW/IHSS-R Program pays the Individual Provider the balance of the payroll. When the Homemaker Mode of service is used, the Share of Cost has to be paid directly to the County. When the County Contractor mode of service is used, the Share of Cost is paid directly to the County Contractor, who serves as the Provider. The Share of Cost is then reflected on the invoice submitted to the County by the County Contractor.

If the Recipient's Share of Cost is less than the gross but exceeds the net earnings of a Provider, then the Share of Cost is paid by the Recipient directly to the County in full or split between Provider and County payments. When the Individual Provider mode of service is used, if the Share of Cost exceeds the amount of the Provider's wages for the first pay period of the month, CMIPS II produces a zero dollar (\$0.00) warrant for the IP from the State Controller's Office. The remainder of the Share of Cost is paid to the Provider after work is completed for the next pay period, and CMIPS II deducts from the net amount of the warrant the remaining amount of the Share of Cost.

In CMIPS II, the Share of Cost for PCSP/IPW Recipients is tracked, maintained, and reported by MEDS. MEDS receives the recipient's Share of Cost information through processes described in



Paragraph 11.1.3, Service Eligibility, Paragraph 11.1.3.1, Medi-Cal and IHSS Residual Income Eligibility (Share of Cost), Paragraph 11.1.3.2, Share of Cost Adjustments, and through outside system interfaces between SAWS and MEDS. The IHSS Share of Cost is tracked and reported by CMIPS II.

#### ***12.2.4.1.1.1 Medi-Cal Recognized Expense (MRE) Amount***

PCSP/IPW Recipients may have a Medi-Cal Share of Cost that is greater than the IHSS Share of Cost. For these PCSP/IPW Recipients; pursuant to WIC Section 12305.1 which limits the Share of Cost of PCSP/IPW Recipients to the lesser of the two Shares of Cost (IHSS Residual or Medi-Cal) CMIPS II will apply the IHSS Share of Cost amount for payroll processing. CMIPS II will track the difference between the Medi-Cal Share of Cost and the IHSS Share of Cost, commonly referred to as the “MRE amount”. In addition, CMIPS II will reduce the MEDS Medi-Cal Share of Cost balance by the MRE amount via the MEDS interfaces described in Exhibit 6-1, SysRS, Interfaces. CMIPS II receives the monthly Medi-Cal Share of Cost, including changes to the SOC, from the SAWS and MEDS interfaces.

On a monthly basis, CMIPS transmits to MEDS a file of recipients for which an MRE payment was made. The funds for the total monthly MRE amount are sent to DHS’ Third Party Liability Branch.

#### **Requirement(s)**

1. CMIPS II shall accept and track the Medi-Cal Share of Cost received from the SAWS and MEDS interfaces.
2. CMIPS II shall send transactions to MEDS to reduce the Medi-Cal SOC balance by the Medi-Cal recognized expense amount for each PCSP/IPW Recipient who has the IHSS Share of Cost applied to their case.
3. CMIPS II shall track the Medi-Cal recognized expense amount by funding source (IPW or PCSP) for each PCSP/IPW Recipient who has the IHSS Share of Cost applied to their case.
4. CMIPS II shall produce a file of recipients for which an MRE payment was made to send to DHS.
5. CMIPS II shall report the total monthly MRE amount to DHS’ Third Party Liability Branch.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### ***12.2.4.1.1.2 Share of Cost Spend Down***

The MEDS Point of Service (POS) system provides point-in-time information on the PCSP/IPW recipient’s Share of Cost balance (i.e. MEDS POS shows the PCSP/IPW recipient’s current Share of Cost balance to include Share of Cost reductions due to other payments).

In CMIPS II, determination of the PCSP/IPW recipient’s Share of Cost for the purpose of payroll processing shall be performed through a real-time interface with the MEDS POS system. During daily payroll processing, CMIPS II will determine the PCSP/IPW Recipient’s Share of Cost balance by querying the MEDS POS system, deduct the outstanding Share of Cost from the CMIPS II payment, and reduce or “spend down” the MEDS POS Share of Cost balance by the amount deducted by CMIPS II.



The payroll processing of Share of Cost for advance pay cases is handled differently. Towards the end of each month, MEDS will provide a monthly renewal file reporting Share of Cost for each recipient. The SOC indicated on the file will be assigned and deducted as the SOC for the advance pay case. As part of renewal file processing, CMIPS II produces a file of spend down transactions and transmits it to DHS.

The Share of Cost for IHSS-R Recipients is tracked, maintained, and reported in CMIPS II. During daily payroll processing, CMIPS II will not need to interface with the MEDS POS for IHSS-R Recipients.

**Requirement(s)**

1. The Share of Cost amount shall be included in the gross wages for tax and withholding calculations.
2. CMIPS II shall obtain the Share of Cost amount for daily payroll processing from the MEDS Point of Service (POS) system by means of a real-time interface.
3. CMIPS II shall deduct the accurate Share of Cost amount from the net wages.
4. If the Share of Cost amount for any pay period exceeds the net wages, CMIPS II shall produce an earnings statement and a warrant for a zero dollar (\$0.00) amount. CMIPS II shall deduct the outstanding Share of Cost balance from the subsequent pay period.
5. CMIPS II shall reduce or “spend down” the MEDS POS Share of Cost balance by the Share of Cost amount deducted from the net wages by means of the real-time MEDS POS interface.
6. CMIPS II shall not transfer any Share of Cost balance remaining at the end of all monthly time entry processing to a subsequent month.
7. CMIPS II shall process adjustments to the MEDs Medi-Cal Share of Cost balance by means of the MEDS interfaces described in Exhibit 6-1, SyRS – Interfaces.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

**12.2.4.1.2 Advance Pay Reconciliation**

At the beginning of every month, advance pay Recipients receive warrants based on authorized service hours. After the work is performed, both the Recipient and the Individual Provider sign the timesheet and submit it to the payroll processing location to reconcile the payment and authorized IPW/IHSS-R services. Once all the timesheets for an individual recipient are received, CMIPS II compares the actual hours worked and if the hours worked do not match the hours authorized, CMIPS II notifies the authorized county staff who adjusts the authorized hours for that pay period to match the actual hours worked.

In addition, CMIPS II reconciles the “Advance Pay Withholding Estimate” defined Paragraph 12.2.5, Tax and Contribution Management, which were based on authorized hours with the estimated taxes and any adjustments that are based on the actual hours worked and relationship between the Provider and Recipient.

**Requirement(s)**

1. CMIPS II shall generate an electronic file at the beginning of each month to SCO with pre-approved dollar amounts for advance pay Recipients.

2. CMIPS II shall adjust the wages and withholding information to maintain accurate tax records. CMIPS II shall report the wage and withholding information to the tax agencies at the reconciliation process.
3. For tax reporting, the Advance Pay withholdings shall be reported for the period in which the Advance Pay warrant is issued, not when the timesheet is received by the Contractor.
4. At the end of the month, CMIPS II advance pay reconciliation shall determine that IPW/IHSS-R services paid were actually accounted for. Any un-reconciled amounts and hours shall be reported to the user to resolve any discrepancies in accordance with Paragraph 12.3, Warrant Management.
5. CMIPS II shall produce a monthly report for each County of all payment activity for advance pay and arrears pay.
6. When needed, CMIPS II shall allow authorized staff to enter advance pay adjustments into CMIPS II.
7. CMIPS II shall support reconciliation of the advance payments with the advance pay timesheets received.
  - a. As advance pay timesheets are received, CMIPS II advance pay reconciliation shall determine that the “Advance Pay Withholding Estimate” defined in Paragraph 12.2.5, Tax and Contribution Management, was actually accounted for based on the actual hours worked and relationship to the Recipient for the Individual Provider. Any un-reconciled amounts shall be resolved in accordance with Paragraph 12.3, Warrant Management.
  - b. CMIPS II shall track the Providers that should be returning timesheets for each Recipient and once all the Providers for an individual Recipient have turned in their timesheets for a pay period, CMIPS II shall:
    - i) Reconcile the authorized hours and payments and the actual hours and payments for the aggregated Providers.
    - ii) Reconcile the total “Advance Pay Withholding Estimate” as defined Paragraph 12.2.5, Tax and Contribution Management, item 3, with actual withholdings for the aggregated Providers.
    - iii) Report any un-reconciled hours and amounts to the user to resolve any discrepancies in accordance with Paragraph 12.3, Warrant Management.
8. CMIPS II shall track and display the status on all advance pay timesheets, including the following:
  - a. Mailed/Sent
  - b. Received/Entered
  - c. Reconciled
  - d. Errors.
9. CMIPS II shall identify the following reconciliation errors:
  - a. No hours, wages, Share of Cost, deductions or taxes are accounted for
  - b. Less than authorized hours, wages, Share of Cost, deductions or taxes are accounted for
  - c. Excess hours, wages, Share of Cost, deductions, or taxes are accounted for.
10. CMIPS II shall accept the following reconciliation adjustments:

- a. Add hours, wages, Share of Cost, deductions, and/or taxes to the Provider, i.e., Recipient or Provider was 'under-credited'
  - b. Subtract hours, wages, Share of Cost, deductions, and/or taxes from the Provider, i.e., Recipient or Provider was 'over-credited'
  - c. Force a balance when there is no type of reconciliation possible, i.e., the Recipient is deceased, no possible refund is available, and the Provider did not work.
11. CMIPS II shall generate a case event as defined in Paragraph 14.1.1, Case Event Management, when an advance pay timesheet has not been received within the time frame defined by MPP 30-767.133(b).

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **12.2.4.2     *Warrant and Timesheet Tape***

Payroll information is provided to SCO for processing. The warrant, statement of earnings, and a new timesheet for the next pay period are printed and mailed to the Provider by SCO. STO provides warrant information to the Contractor for update to CMIPS II.

Each business day, the Contractor processes daily payroll and provides a cartridge tape or cross system tape, or electronically exchanges information including claims files, remittance advice information, and audit data to SCO. The Contractor delivers the recorded payment information daily to CDSS. The Contractor notifies a certifying officer designated by CDSS of the amount of gross payroll and of employer contributions. The certifying officer prepares a Claim Schedule and a Request for Transfer of Funds. The Contractor delivers these documents to SCO. SCO produces and mails Provider and Recipient warrants, earnings statements, and Provider timesheets. Monthly, SCO also produces warrants to disbursing banks for Electronic Funds Transfer (EFT), to the labor organizations for dues deductions, and to Public Authorities or other entities for benefits deductions. The Contractor retrieves a data exchange tape from SCO with warrant numbers, issue dates, and warrant amounts. SCO also produces output for their financial system to move money. The Contractor also retrieves a daily tape of cleared (cash) and redeposited warrants from STO. The Contractor updates CMIPS II with the warrant and paid information. SCO's turnaround time is two (2) business days for claims received before 3:00 PM.

#### **Requirement(s)**

1. CMIPS II shall produce at least one (1) electronic tape claim file every business day, as defined in the California State Controller's Office Division of Audits Electronic Tape Claim Submission Requirements Manual, which can be found in the Bidder's Library.
2. CMIPS II shall include all necessary data, as defined in the California State Controller's Office Division of Audits Electronic Tape Claim Submission Requirements Manual, which can be found in the Bidder's Library, in the electronic tape claim file to enable SCO to produce warrants.
3. CMIPS II shall produce the electronic tape claim including variable audit data, as defined by SCO Audits, and additional Provider information, e.g., timesheet messages.
4. CMIPS II shall make all payments for services directly to the Provider except as defined by MPP 30-769.73.
5. CMIPS II shall allow the user to suspend warrant issuances, regardless of mode of entry or type of warrant, when suspension is completed prior to creation of the electronic tape claim.

6. CMIPS II shall not include suspended warrants in the electronic tape claim transmitted to SCO.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_ NO \_\_\_\_\_

#### **12.2.4.2.1 Earnings Statement**

SCO prints and mails the earnings statement with each warrant.

##### **Requirement(s)**

1. CMIPS II shall include all necessary data, as defined in the California State Controller's Office Division of Audits Electronic Tape Claim Submission Requirements Manual, which can be found in the Bidder's Library, in the electronic tape claim file to enable SCO to produce one (1) detailed earnings statement for every warrant produced.
2. CMIPS II shall include all necessary information in the electronic tape claim file for detailed earnings statements pursuant to California Labor Code §226.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_ NO \_\_\_\_\_

#### **12.2.4.2.2 Electronic Funds Transfer (EFT)**

Electronic Funds Transfer is available to all advance pay Recipients who have received PCSP/IPW/IHSS-R for one year and to IHSS/PCSP/IPW and WPCS Providers who have worked in the PCSP/IPW/IHSS-R and WPCS Programs for a minimum of 90 days.

For Advance Pay Recipients to request direct deposit by EFT, the Recipient requests and submits a Direct Deposit Enrollment Form to the Contractor as described in Section 6 SOW, Paragraph 4.6.3.8, Direct Deposit Services.

For IHSS/PCSP/IPW and WPCS Providers; after serving a 90 day wait period, the providers can request Direct Deposit Enrollment Forms from the Contractor as described in Section 6 SOW, Paragraph 4.6.3.8, Direct Deposit Services.

During the payroll process, the Contractor submits an EFT pre-notification tape to SCO for processing. SCO sends the pre-notification tape to a disbursing bank for processing. If there are any discrepancies the transaction will fail and the Automated Clearing House (ACH) will send a "returned items report" to the agency (i.e., CDSS). Normally, these reports arrive within 15 banking days from the date SCO transmitted the pre-note file to the ACH. If, after 15 banking days, the agency has not received a "returned items report", CDSS and the Contractor may assume the transactions were successful. CDSS forwards the "returned items report" to the Contractor. The Contractor is responsible for discrepancy resolution. Users may also change, cancel, or inquire on the EFT. The Contractor produces a daily EFT tape for processing by SCO. EFT payments continue until the Recipient requests cancellation.

When errors occur in the direct deposit process, the disbursing bank notifies CDSS of the discrepancies. CDSS notifies the Contractor. The Contractor is responsible for error resolution.

##### **Requirement(s)**

1. CMIPS II shall make payments to Advance Pay Recipients by EFT or by paper warrant pursuant to W&IC §12304.3.
2. CMIPS II shall make payment to Individual Providers by EFT or by paper warrant.

3. CMIPS II shall generate payments to be disbursed by SCO by EFT, paper warrant, or by fund transfer between agency appropriations.
4. CMIPS II shall include a pre-notification process to validate transactions in the EFT process.
5. CMIPS II shall process payroll for paper warrants while an EFT record is in pre-notification status or on hold.
6. For any returned EFT payment, CMIPS II shall place the direct deposit enrollment on hold and submit a claim to SCO for issuance of a warrant.
7. CMIPS II shall capture, track, and display EFT information.
8. CMIPS II shall accept additions, modifications, and cancellations to an EFT request.
9. CMIPS II shall continue payments by EFT until the Recipient or Provider requests cancellation, or until the Recipient no longer qualifies for advance pay.
10. If an EFT record is left on hold for a system configurable length of time, CMIPS II shall generate a case event as defined in Paragraph 14.1.1, Case Event Management.
11. CMIPS II shall accept designations to the financial account of the Recipient's legal guardian or conservator to receive the direct deposit pursuant to MPP 30-769.732.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_ NO \_\_\_\_\_

### **12.2.5 Tax and Contribution Management**

CMIPS II maintains individual records of wages and withholding for each Recipient and Individual Provider. Each Recipient is considered a separate employer for payroll, tax, and contribution purposes. CMIPS II calculates, processes, transmits, and files quarterly and annual tax reports and payments to the Employment Development Department (EDD), the Internal Revenue Service (IRS), and the Social Security Administration (SSA). CMIPS II provides payroll accounting and audit trails. CMIPS II deducts Disability Insurance and Personal Income Tax (PIT), employee taxes, and contributions, which are deducted from Provider's earnings. Unemployment Insurance and Employment Training Tax (ETT) are employer taxes and contributions. The employer taxes and contributions are calculated based on the Recipient and paid by CDSS on behalf of the Recipient. Wage information is reported at the time it is earned; tax and contribution information is reported at the time it is paid. Annually CMIPS II aggregates payments for providers who work for more than one recipient to assist the provider with refunds from FICA threshold withholding.

#### **Requirement(s)**

1. CMIPS II shall maintain individual records of wages and withholding for each Recipient and Individual Provider.
2. CMIPS II shall perform all calculations, withholdings, contributions, transmitting, and reporting of taxes and deductions according to State and Federal laws and as defined by W&IC §12302.2.
3. CMIPS II shall manage taxes for Advance Pay Recipients to include the following:
  - a. CMIPS II shall calculate estimated taxes on the gross amount for advance pay Recipients, excluding Personal Income Taxes (PIT) and Federal Income Taxes (FIT), pursuant to MPP 30-769.731.

- b. CMIPS II shall calculate and record an “Advance Pay Withholding Estimate” for the employment taxes (FICA, FUTA, Medicare, SDI, SUI, ETT) for each Advance Pay warrant.
    - i) If the Recipient has more than one Provider, the “Advance Pay Withholding Estimate” is based on the assumption that there is one Provider (Employee) with no relationship to the Recipient (Employer) that would exempt them from employment taxes.
    - ii) If the Recipient has only one Provider who has a relationship with the Recipient that makes them exempt from employment taxes, CMIPS II shall not include those taxes in the “Advance Pay Withholding Estimate”.
    - iii) CMIPS II shall reconcile the “Advance Pay Withholding Estimate” with the payroll, taxes, and adjustment based on the actual hours worked by the Provider(s) as reported on the timesheet(s) and based on the actual relationship between the Provider and Recipient as defined in Paragraph 12.2.4.1.2, Advance Pay Reconciliation.
  - c. CMIPS II shall withhold the employee portion of FICA, Medicare, SDI, and Share of Cost from the Advance Pay warrant based on the “Advance Pay Withholding Estimate”.
- 4. CMIPS II shall report all subject wages, contributions, and tax withholdings as required by IRS, EDD, and MPP 30-769.84.
  - 5. CMIPS II shall report on combined cumulative wages, taxes and deductions for a Provider, for all Recipients worked for.
  - 6. CMIPS II shall report cumulative wages, contributions, and taxes for each Provider and Recipient, and contribution amount by deduction by period.
  - 7. CMIPS II shall report cumulative wages, contributions and taxes as they were originally calculated on each pay record upon request.
  - 8. CMIPS II shall produce all source files, remittance tapes, paper summaries, and backup listings for all quarterly and annual tax reporting as defined in Artifact 6 - Reports, located in the Bidder's Library and Exhibit 6-1 SyRS - Interfaces.
  - 9. CMIPS II shall include any Recipient Share of Cost in all tax calculations and reporting.
  - 10. CMIPS II shall exclude deceased Individual Provider wages from all tax withholdings.
  - 11. During the advance pay reconciliation, CMIPS II shall calculate, adjust, and report all wages, taxes and contributions based on the actual hours worked.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **12.2.5.1 Federal Taxes**

#### **Requirement(s)**

- 1. CMIPS II shall calculate, maintain, and withhold Social Security (FICA) and Medicare contributions on behalf of the Individual Provider, based on the Provider's total wages pursuant to MPP 30-769.831.
- 2. CMIPS II shall withhold all employee taxes by payroll deduction pursuant to 26 CFR §31.3102-1.



3. CMIPS II shall use the State of California's Department of Social Services Federal Employer Identification Number (FEIN) for purposes of tax reporting on behalf of all PCSP/IPW/IHSS-R Recipients qualifying as employers to IRS and SSA, pursuant to Internal Revenue Service Code, Section 3504.
4. CMIPS II shall produce a single Employer's Quarterly Federal Tax Return (Form 941) for tax reporting as defined by the Internal Revenue Service Circular E, Employer's Tax Guide (Publication 15), and Internal Revenue Service Household Employer's Tax Guide (Publication 926).
5. Annually, and upon request from the State Project Manager, CMIPS II shall reconcile Forms 941 with Forms W-2 and W-3.
6. CMIPS II shall report Federal Unemployment Tax (FUTA) by producing a single Employer's Annual Federal Unemployment (FUTA) Tax Return (Form 940) as defined by the Internal Revenue Service Circular E, Employer's Tax Guide (Publication 15), and Internal Revenue Service Household Employer's Tax Guide (Publication 926).
7. CMIPS II shall accurately calculate FUTA based upon Individual Provider wages pursuant to MPP 30-769.82.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **12.2.5.2     *State Taxes***

##### **Requirement(s)**

1. CMIPS II shall produce the Quarterly Wage and Withholding Report (DE 6) as required by the Employment Development Department (EDD).
2. CMIPS II shall use the individual State Employer Identification Numbers (SEIN) assigned by EDD for tax reporting purposes to EDD.
3. For each Recipient, CMIPS II shall accept and maintain multiple Employer Numbers as assigned by EDD and report accurately for each account number.
4. Once a Recipient has been subject to employer registration, CMIPS II shall include that Recipient in all State tax reporting, regardless of the wages paid, for the remainder of the current and all of the following year.
5. CMIPS II shall process tax payments as defined by EDD. The current version of the EDD PCSP/IPW/IHSS-R Reporting Requirements Handbook can be found in the Bidder's Library.
6. CMIPS II shall monitor, track, and reconcile any refunds due to, and overpayments paid to, EDD.
7. CMIPS II shall reconcile the PIT Wages on the DE 6 with the W-2 amount as required by EDD.
8. CMIPS II shall report Individual Provider wages quarterly on the Quarterly Wage and Withholding Report (DE 6), on magnetic media, or by Electronic Data Interchange (EDI) as defined by EDD.
9. CMIPS II shall produce a Payroll Tax Deposit (DE 88) coupon for each tax-reporting Recipient as defined by EDD.
10. CMIPS II shall produce an Annual Reconciliation Statement (DE 7) for each Recipient as defined by EDD.

11. CMIPS II shall accurately calculate, reconcile and report total subject wages, Unemployment Insurance (UI) wages, State Disability Insurance (SDI) wages; UI contributions paid, Employment Training Tax (ETT), and SDI contributions paid; and PIT Withholding taxes due for each Recipient for the entire year on the Annual Reconciliation Statement (DE 7) pursuant to the following:
  - a. EDD Household Employer's Guide (DE 8829)
  - b. EDD Employer's Guide (DE 44), and the
  - c. EDD Information Sheet - Household Employment (DE 231L).
12. CMIPS II shall timely and accurately produce quarterly and annual reports of contributions, reports of wages, and electronic fund transfers of contributions pursuant to California Unemployment Insurance Code (UIC) §1088. This is currently reported on the DE 6 and DE 7.
13. CMIPS II shall generate a separate Annual Reconciliation Statement (DE 7) per Recipient for each valid Employer Number that had been reported on during the year.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **12.2.5.3     *Employer Registration***

EDD requires all employers (Recipients) subject to the California payroll tax laws to submit a registration form. CMIPS II submits a tape to EDD of all Recipients who meet the employer registration requirements. EDD processes the tape and returns an eight-digit Employer Account Number, the State Employer Identification Number (SEIN), for each Recipient. CMIPS II maintains and reports taxes using the same Employer Account Number for those Recipients.

#### **Requirement(s)**

1. CMIPS II shall register and obtain an SEIN pursuant to W&IC §12302.2.
2. Via automated data exchange, CMIPS II shall obtain and use an EDD assigned SEIN for each qualifying Recipient.
3. For new Recipients, CMIPS II shall use actual total wages for the quarter.
4. CMIPS II shall determine the Recipients to be included in the Registration Form (DE 1) based on the total accumulated subject wages paid to all of their related Providers each quarter, as defined by EDD.
5. CMIPS II shall produce the employer registration (DE 1) tape sent to EDD in order to obtain the correct Employer Account Number for each Recipient as defined in Exhibit 6-1 SyRS Interfaces. The employer registration information sent to EDD shall also include indicators for the following:
  - a. Recipient's SSN has been successfully validated
  - b. Elective SDI coverage.
6. CMIPS II shall obtain an updated SEIN for every change in total subject wages that brings the Recipient over or under EDD defined thresholds.
7. CMIPS II shall accept and process the employer registration results.
8. For each Recipient, CMIPS II shall accept and maintain multiple SEINs as assigned by EDD.
9. CMIPS II shall provide updates to EDD for Recipient changes, including but not limited to: demographic changes, address changes, death notifications, leaves, and terminations.

10. For any Recipient who, within the last three (3) years, has an inter-county transfer, a leave and reinstatement, or a termination and new case, CMIPS II shall include the prior valid Employer Account Number with the registration information.

11. CMIPS II shall accept Employer Account Number updates electronically from EDD.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **12.2.5.4 Employee's Withholding Allowance Certificate (W-4 and DE 4)**

Individual Providers who are paid in arrears may have Federal Income Tax (FIT) and Personal Income Tax (PIT) withheld from their paychecks if they apply and meet certain eligibility requirements established by IRS. For Individual Providers, income tax withholding is voluntary. The Individual Provider may also submit a W-4 claiming an exemption from withholding. When an Individual Provider is established in CMIPS II, the Individual Provider can complete an Employee's Withholding Allowance Certificate, Form W-4, and/or Form DE 4, and submit it to the County. PCSP/IPW/IHSS-R staff verify that the W-4 or DE 4 is completed correctly, and forwards the documents to the Contractor for data entry in CMIPS II. The Contractor enters and maintains all W-4 and D-4 forms and records as defined in Section 6 SOW, Paragraph 4.6.3.4, Withholding Management. When an Individual Provider enters a dollar amount requesting that additional monies for either FIT or PIT be withheld, CMIPS II withholds this amount from each paycheck. An Individual Provider can also request that different amounts be withheld for FIT and PIT. In order to claim a different marital status or withhold a different dollar amount for Personal Income Tax (PIT) than is specified on the W-4, the Provider files a DE 4 for PIT. Providers may only file a DE 4 if the Provider has previously filed a W-4.

#### **Requirement(s)**

1. CMIPS II shall accept W-4 and DE 4 entry of all information including but not limited to that defined in Paragraph 19, Information Groupings.
2. CMIPS II shall apply one W-4 and one DE 4 document to each Provider/Recipient relationship.
3. CMIPS II shall accept additional different withholding amounts for both FIT and PIT.
4. CMIPS II shall accept an exemption from withholding for both FIT and PIT.
5. CMIPS II shall not apply any W-4 and DE 4 withholding amounts unless designated by the Provider.
6. CMIPS II shall not apply DE 4 withholdings for an Individual Provider unless W-4 withholdings have been applied.
7. CMIPS II shall calculate and process PIT withholdings based on the DE 4 information.
8. If a separate DE 4 has not been entered, CMIPS II shall calculate and process PIT withholdings based on the W-4 information.
9. CMIPS II shall calculate and process FIT withholdings based on the W-4 information.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **12.2.5.5 Earned Income Credit (EIC) (W-5)**

If their income falls below a specified limit, Individual Providers qualify for an Earned Income Credit (EIC) toward their Federal tax liability. If they qualify based on the eligibility requirements contained in the Internal Revenue Code and IRS form W-5, they may elect to

receive an advance EIC payment by completing and submitting an EIC Advance Payment Certificate (W-5).

The Individual Provider obtains, completes, and submits the W-5 form to the County. County staff verify that the form is correct and forward the forms to the Contractor for data entry of information in CMIPS II. The Contractor enters and maintains all W-5 forms and records as defined in Section 6 SOW, Paragraph 4.6.3.4, Withholding Management.

**Requirement(s)**

1. CMIPS II shall capture, track, and display the W-5 information.
2. CMIPS II shall accept only one (1) W-5 form entry for each Provider/Recipient relationship. When a Provider is linked to multiple Recipients, CMIPS II shall allow only one Provider/Recipient relationship to have an active EIC entry.
3. CMIPS II shall revoke the earned income advance payments when the Individual Provider wages from any single Recipient equal the maximum allowable, pursuant to the Internal Revenue Service Circular E, Employer's Tax Guide (Publication 15) and the Internal Revenue Service Household Employer's Tax Guide (Publication 926).
4. CMIPS II shall automatically revoke all W-5 designations at the end of each calendar year pursuant to the Internal Revenue Service Circular E, Employer's Tax Guide (Publication 15) and the Internal Revenue Service Household Employer's Tax Guide (Publication 926).
5. CMIPS II shall calculate the EIC advance payment pursuant to all regulations and guidelines contained in the Internal Revenue Service Circular E, Employer's Tax Guide (Publication 15) and the Internal Revenue Service Household Employer's Tax Guide (Publication 926).
6. CMIPS II shall include all EIC advance payments in the payroll processing for submission to SCO.
7. The EIC payments shall be effective and payable in CMIPS II, on the first payroll period after the W-5 receipt date, pursuant to the Internal Revenue Service Circular E, Employer's Tax Guide (Publication 15) and the Internal Revenue Service Household Employer's Tax Guide (Publication 926).
8. CMIPS II shall not include EIC advance payments as wages and shall not withhold income, social security, or Medicare taxes, pursuant to the Internal Revenue Service Circular E, Employer's Tax Guide (Publication 15) and the Internal Revenue Service Household Employer's Tax Guide (Publication 926).
9. CMIPS II shall add the EIC payment to the employee's net pay for the pay period, pursuant to the Internal Revenue Service Circular E, Employer's Tax Guide (Publication 15) and the Internal Revenue Service Household Employer's Tax Guide (Publication 926).
10. CMIPS II shall accurately report the total EIC advance payments on Form W-2 and Form 941, pursuant to the Internal Revenue Service Circular E, Employer's Tax Guide (Publication 15) and the Internal Revenue Service Household Employer's Tax Guide (Publication 926).

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_ NO \_\_\_\_\_

**12.2.5.6 Unemployment Insurance (UI)**

Unemployment Insurance is an employer-paid tax based on UI taxable wages established as part of a national program administered by the U.S. Department of Labor under the Social Security

Act. The UI program provides temporary payments to individuals who are unemployed through no fault of their own. The UI program is based on Federal law, but executed through State law. Employers finance the UI program by tax contributions. In California, EDD administers the UI program according to guidelines established by the California UI Code (CA UIC) and the California Code of Regulations (CCR), Title 22. UI tax-rated employers pay a percentage on wages for each employee in a calendar year. The UI rate schedule and amount of taxable wages are determined annually for each employer.

**Requirement(s)**

1. For the purpose of determining UI, CMIPS II shall determine family employment pursuant to 22 CCR §631-1.
2. For the purpose of determining UI, CMIPS II shall determine domestic services pursuant to 22 CCR §629-1.
3. CMIPS II shall capture, calculate, track, and display all required UI information, at a minimum, pursuant to CA UIC 1088.
4. CMIPS II shall report all new employees as described in CA UIC §1088.5(d)(4).
5. CMIPS II shall not apply UI tax to any Recipient who provides an exemption pursuant to CA UIC §13026.
6. CMIPS II shall capture and track Recipient accounts claiming a UI exemption.
  - a. CMIPS II shall calculate UI contributions on accounts claiming an UI exemption.
  - b. CMIPS II shall not report UI contributions to EDD.
  - c. CMIPS II shall maintain the calculated UI contributions for audit purposes.
7. CMIPS II shall accurately calculate UI based on Employer wages pursuant to the California Unemployment Insurance Code (CA UIC) §13020, and the California Code of Regulations, Unemployment and Disability Compensation. The UI Tax Rates are provided by EDD electronically once a year.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

**12.2.5.7      *Workers' Compensation Benefits and Claims***

Welfare and Institutions Code §12302.2 requires worker's compensation coverage for Individual Providers. Pursuant to MPP 30-769.81, CDSS has elected to provide the worker's compensation coverage through a single statewide insurance policy with the State Compensation Insurance Fund (SCIF).

An Individual Provider injured in the course of employment receives a PCSP/IPW/IHSS-R Employee's Claim for Workers Compensation Benefits (SOC 412) within one (1) business day of notifying the County of the injury. The Individual Provider completes and returns the claim form. The County files the form with SCIF within fourteen (14) business days from the date of knowledge of the injury. In addition to the claim form, the County also files an injury report with SCIF within five (5) business days of the Recipient or County's knowledge of the injury.

CMIPS II receives claim information from SCIF through an automated interface. When payroll is processed for any Individual Provider with an active claim, CMIPS II produces a case event as defined in Paragraph 14.1.1, Case Event Management, for the CWD.



**Requirement(s)**

1. CMIPS II shall accept Worker's Compensation data directly from SCIF as defined in Exhibit 6-1 SyRS - Interfaces.
2. When a timesheet is entered for an Individual Provider with an active claim, CMIPS II shall produce a case event as defined in Paragraph 14.1.1, Case Event Management.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

**12.2.5.8 State Disability Insurance (SDI)**

The California Employment Development Department (EDD) administers the State Disability Insurance program. SDI is a deduction from employees' wages that provides temporary payments to workers who are unable to perform their usual work because of a pregnancy or a non-occupational illness or injury. The SDI rate and taxable wage limit may change each year.

There are two types of SDI coverage: Standard and Elective. Standard SDI is available to qualified Individual Providers whose employer (the Recipient) meets a minimum quarterly payroll. Non-family and Recipient's adult child Providers can qualify for Standard SDI. Spouses, parents, and minor child Providers can qualify for Elective SDI coverage. Elective SDI coverage does not require the Individual Providers to meet any quarterly wage minimum.

Upon request for Elective SDI coverage, the Recipient and Individual Provider complete an Elective SDI Form and submit the form to the CWD. County staff review the form for completeness and signatures. Upon receipt of a properly completed form, County staff enters the appropriate information in CMIPS II. CMIPS II calculates and withholds the disability insurance tax.

Upon a request for termination of Elective SDI, the Recipient completes, signs, and submits an Elective SDI Form to the CWD. County staff review the form for completeness and signatures. Upon receipt of a properly completed form, CMIPS II allows County staff to terminate the disability insurance tax withholding in CMIPS II.

**Requirement(s)**

1. For each SDI withholding request, CMIPS II shall determine eligibility for both Standard and Elective SDI coverage pursuant to all regulations and guidelines contained in the Employment Development Department Household Employer's Guide (DE 8829), the Employment Development Department Employer's Guide (DE 44), and the Employment Development Department Information Sheet - Household Employment (DE 231L).
2. CMIPS II shall withhold Elective SDI tax commencing with the Individual Provider's first warrant after the SDI beginning date.
3. Once authorized, CMIPS II shall maintain the Recipient and Individual Provider under Elective SDI for at least two (2) complete calendar years.
4. Upon request for termination of Elective SDI, CMIPS II shall calculate the earliest ending date for Elective SDI based on the Elective SDI participation requirements.
5. CMIPS II shall determine family member Individual Providers as defined by 22 CCR §631-1.



6. CMIPS II shall convert a son or daughter Individual Provider who is covered under Elective SDI to Standard SDI upon the Individual Provider's eighteenth (18th) birthday, if the employer's (i.e., the Recipient's) payroll meets the Standard SDI eligibility criteria.
7. CMIPS II shall terminate all SDI coverage for a son or daughter Individual Provider upon the Individual Provider's eighteenth (18th) birthday if the Standard SDI payroll eligibility criteria are not met.
8. Once a family member Individual Provider has been covered by Elective SDI, CMIPS II shall allow termination only upon one of the following circumstances:
  - a. When the Individual Provider who is covered by Elective SDI permanently terminates providing PCSP/IPW/IHSS-R/WPCS services for their family member Recipient
  - b. When a child Individual Provider reaches his/her eighteenth (18th) birthday, and the quarterly employer's payroll was not met
  - c. The Recipient chooses to terminate coverage after the two (2) calendar years requirement has been met.
9. CMIPS II shall accurately calculate and withhold SDI from Individual Provider' wages pursuant to MPP 30-769.832.
10. CMIPS II shall calculate SDI tax based on the employee's (i.e., the Provider's) total wages, including the Recipient's Share of Cost.
11. Upon approval for Elective or Standard SDI, CMIPS II shall submit all payments and reports pursuant to regulations and guidelines contained in the Employment Development Department Household Employer's Guide (DE 8829), the Employment Development Department Employer's Guide (DE 44), and the Employment Development Department Information Sheet - Household Employment (DE 231L).

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **12.2.5.9 Tax and Contribution Adjustments**

Any adjustment or corrections to contributions or tax withholds are corrected with the applicable tax agency (e.g., EDD, IRS, etc.).

##### **Requirement(s)**

1. CMIPS II shall support adjustments to contributions or tax withholds, reporting of adjustments to relevant agencies, and reconciliation of adjustments.
2. CMIPS II shall support the reporting of adjustments in the correct quarter.
3. For every Individual Provider and Recipient, CMIPS II shall track when each tax, wage, and contribution was reported to each tax agency.
4. For Advance Pay cases, if PCSP/IPW/IHSS-R services were provided in one (1) quarter (wages earned), and the reconciliation process occurred in a subsequent quarter (taxes and contributions reported), CMIPS II shall report adjustments to EDD.
5. For arrears cases, if PCSP/IPW/IHSS-R services were provided in one (1) quarter (wages earned), and the timesheets received and paid in a subsequent quarter (taxes and contributions reported), CMIPS II shall report adjustments to EDD.
6. All adjustments shall be reported to EDD per Recipient and account (State Employer Identification Number) for prior quarters.

7. CMIPS II shall not report offsetting credit and debit adjustments between Recipient accounts to EDD. (For example if Recipient account A has a credit of \$100 and Recipient account B has a debit of \$100, both adjustments shall be reported separately.)
8. For current year contribution adjustments, if the corresponding DE 6 has been filed, CMIPS II shall report the adjustment on the DE 88 to EDD.
  - a. Credit adjustments shall be reported on subsequent quarter DE 88(s) within the same tax year by reducing the DE 88 amount due. Credit or zero DE 88(s) should not be filed with EDD. If the credit amount exceeds what was offset against the DE 88(s) within the tax year, any additional credit should be reported on the DE 7.
  - b. Debit adjustments shall be reported as additional DE 88s in the appropriate quarter(s) within the tax year and include any penalty and interest due.
9. For current year contribution adjustments, if the corresponding DE 6 has not been filed, CMIPS II shall adjust the contributions internally and not report the adjustment to EDD.
10. For contribution adjustments, if the corresponding DE 7 has been filed, CMIPS II shall report the adjustment on the DE 678 data to EDD.
11. CMIPS II shall report all wage adjustments by quarter on the DE 678 data to EDD for prior quarters.
12. CMIPS II shall report corrections to an Individual Provider's name or SSN on the DE 678 data to EDD.
13. CMIPS II shall report adjustments on Form 941 as defined by the Internal Revenue Service Circular E, Employer's Tax Guide (Publication 15) and Internal Revenue Service Household Employer's Tax Guide (Publication 926).
14. CMIPS II shall accept adjustments due to discrepancies between Forms 941 filed with IRS and Forms W-2 and W-3 filed with SSA and the IRS.
15. CMIPS II shall support annual reconciliation of employer and employee tax withholdings and payments with EDD, IRS and SSA.
16. At the end of the year CMIPS II shall audit and if necessary adjust employer contributions due to changes in wages or exemptions.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_ NO \_\_\_\_\_

#### ***12.2.5.10 Federal Insurance Contributions Act (FICA) Tax Refund***

Federal Insurance Contributions Act (FICA) (Social Security and Medicare taxes) is only payable by Individual Providers who earned more than the IRS defined threshold at the end of each calendar year. CMIPS II aggregates the FICA withholdings for Providers providing services to multiple Recipients (multiple employers) within the tax year. If FICA deductions were taken for Individual Providers whose aggregated wages are less than the IRS defined threshold, the Contractor makes any necessary corrections and produces a FICA refund.

##### **Requirement(s)**

1. CMIPS II shall aggregate wages for Individual Providers working for multiple Recipients for purposes of FICA threshold determination pursuant to IRS Publication 15, Circular E, Employer's Tax Guide and Internal Revenue Service Household Employer's Tax Guide (Publication 926).

2. If FICA deductions were taken for Individual Providers who do not meet the FICA threshold, CMIPS II shall calculate the amount of FICA Refund for each Individual Provider pursuant to IRS Publication 15, Circular E, Employer's Tax Guide and Internal Revenue Service Household Employer's Tax Guide (Publication 926).
3. At the end of each calendar year, CMIPS II shall produce FICA Refunds warrants via the SCO.
4. CMIPS II shall accept FICA refund cancellations, voids, and replacements.
5. CMIPS II shall accept corrections and changes to the FICA refunds.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_ NO \_\_\_\_\_

#### **12.2.5.11 Wage and Tax Statement (W-2)**

By each January 31<sup>st</sup>, the Contractor produces and mails W-2s to all Individual Providers who received credit for PCSP/IPW/IHSS-R/WPCS payroll earnings during the prior year. Since taxes are accrued at the time of payment, not at the times the hours are worked, W-2 forms are issued based upon all activity occurring within a case during the prior year, including all reconciliation, late time sheets, and adjustments. W-2's reflect hours paid during the prior year, not hours worked. The Individual Providers receive one (1) W-2 for every Recipient for whom they worked; if an Individual Provider works for five (5) Recipients, the Individual Provider receives five (5) W-2s. Recipients and County Contractors do not receive W-2s from CMIPS II.

The Contractor produces the annual W-2 tape and all necessary reports. The Contractor sends the W-2 tape, Copy A of Form W-2 and Form W-3 Summary Transmittal to the Social Security Administration by the last day of March to report the wages and taxes of the Individual Providers for the previous calendar year.

If the Individual Provider claims to have not received a W-2 or requests an amendment, the Individual Provider contacts the County. For every correction made and W-2c issued, the Contractor files correction forms W-2c and W-3c with SSA.

#### **Requirement(s)**

1. CMIPS II shall produce Federal W-2 forms and tapes for the preceding calendar year pursuant to IRS Publication 15, Circular E, Employer's Tax Guide and Internal Revenue Service Household Employer's Tax Guide (Publication 926).
2. CMIPS II shall produce Federal W-2 forms for Individual Providers pursuant to Federal and State laws.
3. CMIPS II shall produce a W-3 Summary Transmittal Form pursuant to IRS Publication 15, Circular E, Employer's Tax Guide and Internal Revenue Service Household Employer's Tax Guide (Publication 926).
4. If the Individual Provider applied for an SSN but has not received it at the time of filing, CMIPS II shall produce Form W-2 with an SSN of "Applied for."
5. When an Individual Provider SSN modification is entered, CMIPS II shall produce Form W-2c, Corrected Wage and Tax Statement, to show the Individual Provider's SSN for each prior year.
6. CMIPS II shall print duplicate W-2s.

7. CMIPS II shall accept corrections to the demographic data in W-2 records, including, names, SSNs, or addresses.
8. CMIPS II shall produce correction forms W-2c and W-3c pursuant to SSA Publication No. 31-011, Software Specifications and Edits for Correcting Annual Wage Reports.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_ NO \_\_\_\_\_

### **12.2.6 Deduction Management**

Payroll deductions are based on the date worked, not on the date paid.

#### **Requirement(s)**

1. CMIPS II shall provide the capability for deductions to be withheld from the Individual Providers' warrants. Deductions are based on the date worked, not on the date paid.
2. CMIPS II shall capture, track and display deductions.
3. CMIPS II shall process arrears deductions based upon the date the corresponding work was performed.
4. CMIPS II shall withhold deductions from a late (prior pay period) payment based on when the corresponding work was performed.
5. CMIPS II shall accept mandatory and voluntary designations to withholdings.
6. CMIPS II shall withhold deductions based on: fixed amount, percent of gross or net wages, table amount, and formula amount.
7. CMIPS II shall accept both Pre-tax and Post-Tax Deductions.
8. CMIPS II shall automatically adjust deductions when wage adjustments are made.
  - a. CMIPS II shall use the wage rate in effect for the pay period indicated on the timesheet to calculate the payroll and deductions. If an old timesheet is received on a date after the wage rate has been changed but the period worked is on a date prior to the wage rate change, CMIPS II shall use the past wage rate in effect for the pay period indicated on the timesheet to calculate the payroll and deductions. If the timesheet is received on a date after the wage rate has been increased or decreased and the period worked is after the effective date of the wage rate, CMIPS II shall use the current wage rate to calculate the payroll and deductions.
9. CMIPS II shall suspend a deduction if a certain deduction limit is reached.
10. CMIPS II shall prioritize the order in which deductions are processed.
11. CMIPS II shall process deductions in order of priority.
12. CMIPS II shall manage which pay periods a deduction is taken, e.g., the first or second pay-period in any month.
13. CMIPS II shall set a calendar schedule for a deduction including but not limited to every paycheck, monthly, quarterly, semi-annually and annually.
14. CMIPS II shall support not less than ninety-nine (99) deductions for an individual.
15. CMIPS II shall accept and process interface files from the unions and Public Authorities; deduct from Provider accounts; and include payment information on SCO tapes when required.

16. CMIPS II shall accept a payment amount trigger value, below which a deduction is not be made.
17. CMIPS II shall ensure that application of deductions does not result in a negative warrant request.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **12.2.6.1     *Lien Management***

The Lien Management functionality of CMIPS II allows for the Contractor to receive requests for liens, verifies the lien request document, and enters the lien information in the system within ten (10) days of receipt of the lien. During the payment cycle, if an Individual Provider has a lien on file, CMIPS II withholds the calculated or entered lien amount from the payment and applies the amount to the lien balance. Lien warrants are issued by SCO. CMIPS II cannot apply lien withholds for Individual Providers providing services for Advance Pay Recipients as benefit payments are paid directly to the Recipient and not the Provider.

##### **Requirement(s)**

1. CMIPS II shall execute tax liens, levies, and wage garnishments.
2. CMIPS II shall accurately and timely collect, calculate, and report on liens.
3. CMIPS II shall capture, process, track and report lien transactions.
4. CMIPS II shall calculate the maximum allowable lien amount pursuant to the California Labor Code §300 and/or 29 CFR §870.10.
5. CMIPS II shall not calculate or withhold any deductions from lien payments except taxes.
6. CMIPS II shall issue payment via SCO for lien deductions to the lien holder.
7. CMIPS II shall accept a revoke to a lien pursuant to the California Labor Code §300.
8. CMIPS II shall process overpayments, adjustments, stop payments, voids, and replacements on lien payment warrants.
9. CMIPS II shall process Wage Garnishments in accordance with the provisions of "The Wage Garnishment Law" (Cal. Code of Civil Procedure §706.010, et seq.)

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **12.2.6.2     *Provider Benefits***

Public Authorities (PAs) or their equivalent may offer benefits to Individual Providers within their County. The types of benefits may include health, dental, vision and life insurance. The benefits offered by a Public Authority are dependant on what a particular county and union negotiate. The benefit provider for each type of benefit may also vary from county to county (e.g., the health benefit provider in one county can be the same or different than the health benefit provider for an adjoining county).

The Public Authority of each county offering Provider benefits is responsible for the management of those benefits. CMIPS II will not track benefit providers or Provider eligibility for benefits.

If the Individual Provider elects to pay benefits premiums by payroll deduction, the PA submits a file to the Contractor who uses the electronic data to update CMIPS II. CMIPS II deducts the

amount identified by the PA from each identified Individual Provider, produces a monthly report of the deductions, and produces a warrant transaction to be sent to SCO for warrant distribution to each PA.

**Requirement(s)**

1. CMIPS II shall, while processing the daily warrants, deduct the benefits deductions from the Individual Provider's wages. CMIPS II shall produce a monthly report and warrant for each PA.
2. CMIPS II shall accept a file of benefit deductions from PAs or their equivalent.
3. CMIPS II shall accommodate multiple types of benefit deductions as determined by the State Project Manager.
4. CMIPS II shall process one (1) consolidated benefits deductions payment per PA or equivalent per month.
5. CMIPS II shall issue payment via SCO for benefits deductions to the PA or equivalent.
6. CMIPS II shall produce detailed reconciling reports for PA payments showing individual deductions.
7. CMIPS II shall allow for manual entry of benefits data.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

**12.2.6.3 Labor Organization Dues**

Individual Providers may be labor organization members. If payroll deductions are required, the labor organization submits a file to the Contractor, who uses the electronic data to update CMIPS II.

**Requirement(s)**

1. CMIPS II shall, while processing the daily payroll, deduct the labor organization dues from the Individual Provider's wages.
2. CMIPS II shall process one (1) consolidated warrant of all labor organization dues deductions per labor organization local per County, per month.
3. CMIPS II shall issue payment via SCO for labor organization dues to the labor organizations.
4. CMIPS II shall produce detailed reconciling reports for labor organization payments showing individual deductions.
5. CMIPS II shall accept manual data entry of labor organization dues.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

**12.3 Warrant Management**

**Requirement(s)**

1. The Warrant Management function of CMIPS II shall allow the CWD to process changes to warrant transactions.



2. The Warrant Management subcomponent shall include the following functions: Overpayment, Adjustment, Emergency/Supplemental Warrants, Replacement Warrants (includes lost, stolen, voided, and stale dated warrants), and Redeposits.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **12.3.1 Overpayment**

Upon determination of an overpayment, authorized staff enter the overpayment information in the system. The payee (either the Recipient or the Provider) may voluntarily authorize cash recovery of the overpayment in lieu of payment adjustments.

#### **Requirement(s)**

1. For each payment, CMIPS II shall determine if any collection needs to be applied. If a payee has an overpayment on file, CMIPS II shall withhold the specified amount or percent from the payment and apply the withheld amount to the overpayment balance.
2. When the full overpayment has been collected or upon the user closing the overpayment, CMIPS II shall reallocate the recovery to the County. If a warrant that contains an overpayment deduction is voided, CMIPS II shall reverse the deduction at the time of the void, correct the overpayment balance and produce a monthly reconciliation report for the County.
3. CMIPS II shall capture, track, and process overpayment recoveries in any combination of the following methods: balancing, payment adjustment, and voluntary cash recovery.
4. CMIPS II shall display current and prior overpayment collections.
5. CMIPS II shall calculate the amount of Provider overpayments as defined in MPP 30-769.91.
6. CMIPS II shall calculate the amount of overpayments due to increased Share of Cost or ineligibility as defined in MPP 30-768.6b, c & d.
7. CMIPS II shall allow the user to enter an overpayment amount, accept the system-calculated amount, or adjust the system-calculated amount.
8. When processing an overpayment, CMIPS II shall recalculate and make any necessary adjustment to all taxes, and deductions.
9. When processing an overpayment, CMIPS II shall adjust all accumulated totals for gross, withholdings, and net.
10. CMIPS II shall accept holds and closures to the automated collection of overpayments made to Recipients and Providers.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **12.3.2 Adjustments**

CMIPS II can process adjustments to previous transactions. Adjustment transactions include history adjustment to previous payments, refund warrants to Counties, supplemental adjustments, reconciliation of advance payments, Contractor adjustments, reversal of expenditures between PCSP, IPW and IHSS Residual, Worker's Compensation awards, or other health coverage. Upon determination that an adjustment is needed, or upon receipt of payments for Share of Cost or overpayment collection, PCSP/IPW/IHSS-R staff enter adjustment information in the system. CMIPS II generates notification to CDSS that payment has been received and deposited. If the

adjustment results in an underpayment to a Recipient or Provider, CMIPS II processes an Emergency/Supplemental warrant.

**Requirement(s)**

1. CMIPS II shall capture, track, and display the status of payments made from Recipients and Providers directly to the CWD and CDSS.
2. CMIPS II shall process adjustments, including refund warrants to Counties, supplemental adjustments, reconciliation of advance payments, Contractor interface adjustments, and adjustments as a result of workers compensation awards or other health coverage.
3. CMIPS II shall process retroactive Provider payment adjustments.
4. CMIPS II shall process adjustments for Share of Cost. For Share of Cost adjustments, CMIPS II shall interface with the MEDS Point of Service (POS) system in real-time mode.
5. When processing an adjustment, CMIPS II shall recalculate and make any necessary adjustments to taxes, contributions, and deductions.
6. CMIPS II shall report tax and contribution adjustments as defined in Paragraph 12.2.5.9, Tax and Contribution Adjustments.
7. CMIPS II shall calculate adjustments to tax records pursuant to MPP 30-769.255.
8. If the adjustment results in an underpayment, CMIPS II shall produce the appropriate payment pursuant to MPP 30-768.432.
9. CMIPS II shall calculate the amount of underpayments due to an incorrect service authorization, Share of Cost, or restaurant meals as defined in MPP 30-768.42.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

**12.3.3 Emergency/Supplemental Warrants**

CMIPS II can produce an Emergency/Supplemental warrant to initiate and authorize an initial payment for an advance pay Recipient, as a supplemental payment for a prior underpayment to a Recipient or Provider, for payments resulting from retroactive State hearing decisions or a Superior Court pursuant to a Writ of Administrative Mandamus for reimbursing a Provider for an invalid lien deduction, or for other unusual situations not provided for by the regular payroll process.

When authorized staff determine the Recipient or Provider needs an Emergency or Supplemental warrant issued, the user enters the appropriate pay information in the system. CMIPS II generates a notification for supervisory review. On supervisory approval, CMIPS II begins the warrant generation process and notifies the requestor of the approval. If not approved, CMIPS II notifies the requestor of reason for denial to resolve issues and resubmit. CMIPS II processes the request and includes the payment on the daily payroll tape with the normal warrant requests. CMIPS II produces Emergency/Supplemental warrants within three (3) business days of their request by the County, excluding weekends and State holidays.

**Requirement(s)**

1. CMIPS II shall have the ability for the user to request and track Emergency/Supplemental warrants.

2. CMIPS II shall have the ability for the user to add, change, or delete a request for an Emergency/Supplemental warrant until processed.
3. CMIPS II shall produce Emergency/Supplemental warrants for payments resulting from retroactive State hearing decisions or a Superior Court pursuant to a Writ of Administrative Mandamus, resulting from prior underpayments, in excess of the base rate, for severely impaired Recipients in advance pay status who become service eligible for payment between a pay cycle, where the County finds that an emergency situation exists, to Counties for reimbursements of emergency checks, for other unusual situations not provided for by the regular payroll process and where the County deems appropriate as defined by MPP 30-769.252.
4. CMIPS II shall process and issue approved requests for Emergency/Supplemental warrants within three (3) business days, excluding weekends and State holidays.
5. CMIPS II shall include the Emergency/Supplemental warrants in the daily payroll tape with the normal warrant requests.
6. For any new request or change to an existing request for an Emergency/Supplemental warrant, CMIPS II shall produce a pending authorization as defined in Paragraph 14.1.2, Case Authorization Management.
7. CMIPS II shall not process overpayments, liens, labor organization deductions, or benefit deductions from an Emergency/Supplemental warrant if the monthly obligation has already been processed for any given month.
8. CMIPS II shall ensure a supervisor review and approval of Emergency/Supplemental warrant requests.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **12.3.4 Replacement Warrants**

When a Recipient or Provider payee's warrant is lost (includes never received), stolen, or mutilated, CMIPS II generates a replacement warrant for the payee via the daily payrolling process, after ensuring the warrant has not been cashed.

##### **Requirement(s)**

1. CMIPS II shall support the functionality to generate a replacement warrant request to be sent to SCO via the daily payroll process.
2. CMIPS II shall prevent a user from requesting a replacement on a cashed warrant until the investigation is resolved.
3. CMIPS II shall accept a request for a replacement warrant at any time. If the request is received sooner than five (5) days after the original warrant issue date, CMIPS II shall generate a warning message specifying the issue date of the original warrant pursuant to MPP 30-769.253.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

##### **12.3.4.1 Stolen Warrants**

In the event the payee notifies the CWD that a warrant has been stolen, authorized staff use CMIPS II warrant information received from STO to determine if the missing warrant has been cashed. On request by the user, CMIPS II generates a request to be sent to the Contractor

requesting a copy of the cashed warrant. The Contractor processes the request for the copy of the cashed warrant.

The payee completes an Affidavit of Lost/Stolen Warrant Form. Authorized staff send the Affidavit to the Contractor for forwarding to SCO. If the warrant has not been cashed, authorized staff proceed to Stop Payment/Void and Replacement Warrant processes.

If the warrant was cashed, on receipt of the copy of the cashed warrant, the CWD verifies the signature on the warrant. If the situation is resolved (payee remembers cashing check), the issue is ended. If the payee declares that forgery has occurred, the County has the payee complete a Forged Endorsement Affidavit form. The forgery documentation is sent to the Contractor for forwarding to the SCO to begin criminal investigation. The processing of the Affidavit takes a minimum of ninety (90) days. On resolution of the criminal investigation and recovery of the funds, the SCO issues a replacement warrant.

**Requirement(s)**

1. CMIPS II shall generate a request containing issued warrant information to be sent to the Contractor requesting a copy of the cashed warrant.
2. CMIPS II shall track the date the Forged Endorsement Affidavit form is signed by the payee and submitted to SCO.
3. CMIPS II shall produce a listing of requests for copy of cashed warrant.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

**12.3.5 Voided Warrants**

In the event a warrant is identified as lost, becomes mutilated, or County staff determine a stop payment is necessary, CMIPS II allows for the warrant to be voided. County staff can request a Void transaction to issue a stop payment for warrants issued for the incorrect amount, to an incorrect payee, to a service ineligible payee, or for lost warrants.

**Requirement(s)**

1. CMIPS II shall place a stop payment/void on a warrant pursuant to MPP 30-769.254.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

**12.3.6 Redeposits**

When warrants are returned to the SCO as undeliverable, SCO redeposits the warrants into the fund from which they are drawn, detaches the timesheet and earnings withholding statement, and files the warrants. SCO forwards the timesheet and earnings statement to CDSS, who forwards the documents to the Contractor. The Contractor updates CMIPS II to reflect that the warrant was returned and redeposited. The Contractor sends the stub and the timesheet to the CWD. County staff verify the warrant mailing address, make any necessary corrections, and reissue the warrant.

In addition, previously voided warrants are recovered and redeposited. If the warrant is less than one (1) year old, the County can process the request to have the warrant reissued. If the warrant is one year and one day old to three years old, the Contractor can process the request to have the warrant reissued. However, if the warrant is over three years old, the Provider contacts the

California Victim Compensation and Government Claims Board. The Board verifies with SCO and CDSS that a replacement check was not released to the Provider. If no replacement was made, the Board approves payment and issues a replacement warrant. If the warrant is not recovered, it remains in a void status to prevent cashing of the warrant.

**Requirement(s)**

1. CMIPS II shall update warrant information to reflect redeposit information including date of warrant return, and date of redeposit.
2. CMIPS II shall reissue a new warrant on redeposit of a returned warrant.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

**12.3.7 Stale Dated Warrants**

Stale dated warrants are those warrants that are not cashed within one year of issuance. SCO initiates the voids on these warrants and redeposits the amounts. Recipients and/or Providers in possession of stale dated warrants need to request a replacement warrant from the CWD.

**Requirement(s)**

1. CMIPS II shall receive stale dated warrant information from SCO and update the corresponding warrant information within CMIPS II.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

**12.4 Provider Pay Rate Management**

Each County has a default (minimum) pay rate for their Individual Providers. Each County also has the ability to enter a Provider wage different from the default rate. The Counties may change the default rate, upon approval by CDSS, at any time. There is no limit to the number of wage changes in any year. Each County has a County Contractor rate set by their contract with the County Contract agency. Each County also has a default pay rate for their Homemakers.

**Requirement(s)**

1. CMIPS II shall capture, track, and maintain Provider pay rates, by Provider mode and by County, with effective dates.
2. CMIPS II shall maintain multiple rates for each Provider mode.
3. When a user enters a wage rate for an Individual Provider, CMIPS II shall validate the entered rate against both the default and the maximum valid rates for the County for that mode.
4. CMIPS II shall capture and track the default rate and maximum rate for each Provider mode effective in each County.
5. CMIPS II shall maintain multiple rates (one rate per Recipient) with effective dates for each Individual Provider (e.g., a Provider provides PCSP/IPW/IHSS-R/WPCS services in multiple Counties).
6. CMIPS II shall accept initial wage rate assignments to an Individual Provider, to a group of Providers, and to a County.
7. When no wage rate is entered for an Individual Provider, CMIPS II shall assign the default County rate.

8. CMIPS II shall process timesheets using the wage rate in effect during the time period worked regardless of the date of receipt of the timesheet.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **12.4.1 Rate Changes**

When Providers receive County wage increases, CMIPS II allows for an increase to the prior authorized County rate (default rate) by the percent or by dollar amount increase. Whenever a rate change occurs, CMIPS II proceeds to the Final Determination Process as defined in Paragraph 11.1.5, Final Determination, to recalculate eligibility. CMIPS II also applies rate changes for the Homemaker and County Contractor modes. Since the system does not generate payments for these service delivery modes, the rate information is used only for case management and management information purposes.

#### **Requirement(s)**

1. CMIPS II shall accept and process changes to the wage rate for: all Providers statewide, and for each Provider, by County, or by Provider mode.
2. CMIPS II shall process wage rate changes for Individual Provider, County Homemaker, and County Contract service delivery modes.
3. CMIPS II shall accommodate Provider wage increases that affect up to 100 percent of the Providers when required.
4. For a countywide percent or specified dollar amount wage increase, CMIPS II shall increase the prior authorized County default rate by the percent increase or by the specified dollar amount.
5. Pursuant to 29 CFR §778.303, when a retroactive wage increase is paid to the Provider, CMIPS II shall process all retroactive compensation at the same time, including deductions and withholding.
6. Upon any Provider wage rate change, CMIPS II shall apply the new rate to all subsequent payments without user intervention.
7. Upon any retroactive Provider wage rate change, CMIPS II shall adjust prior payments and process the adjustments without user intervention.
8. Upon any Provider wage rate change, CMIPS II shall recalculate the cost of services (monthly hours multiplied by the Provider pay rate) as defined in Paragraph 11.1.5, Final Determination.
9. Upon any Provider wage rate change, CMIPS II shall compare the Share of Cost to the cost of PCSP/IPW/IHSS-R services.
10. If the wage rate change results in the Share of Cost exceeding the cost of PCSP/IPW/IHSS-R services, CMIPS II shall produce a case event as defined in Paragraph 14.1.1, Case Event Management.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **13 PROVIDER MANAGEMENT**

The Provider Management function of CMIPS II allows the County Welfare Department (CWD) and Public Authority (PA), if requested by the CWD, to capture, track, and manage Provider



information. This functionality allows for the enrollment of potential and existing Providers. An enrolled Provider is available to be linked with a recipient to provide PCSP/IPW/IHSS-R and WPCS services.

This component of CMIPS II includes Identification (Provider Management), Provider Enrollment, New Employee Registry, and Provider Maintenance components.

**Requirement(s)**

1. CMIPS II shall capture, track, and display all data required for the user to perform the Provider Management business functions defined in the sub-paragraphs below.
2. CMIPS II shall accept corrections, changes, and deletions to all data in Provider records, as required by the Provider Management business functions.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **13.1 Provider Identification**

CMIPS II maintains information on enrolled Individual Providers.

**Requirement(s)**

1. CMIPS II shall capture, record and track Individual Providers who have successfully fulfilled the enrollment requirements.
2. CMIPS II shall capture, record and track Individual Providers who have successfully registered with the Public Authorities.
3. CMIPS II shall accept and maintain IP's that have registered through the Public Authority interface described in Exhibit 6-1 SyRS - Interfaces.
4. CMIPS II shall allow for the display of enrolled provider information as described in Paragraph 10.1, Online Searches, to be utilized in the identification of potential Individual Providers.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **13.2 Provider Enrollment**

The Recipient selects and hires the Individual Provider, and notifies the CWD. CWD PCSP/IPW/IHSS-R staff verify the Individual Provider's enrollment. If the Provider is currently enrolled and is known to the CMIPS II system, staff identify the Provider as providing services to the Recipient.. If the Provider is unknown to the CMIPS II System, staff begin the enrollment process. CMIPS II captures, tracks, and displays the enrollment status for each Individual Provider pursuant to MPP 30-767.5, DHS Regulation 51204, and the IHSS Plus Waiver (IPW).

**Requirement(s)**

1. CMIPS II shall capture, track and display program enrollment data, status, and status date for each Individual Provider.
2. In Counties where the Public Authority has been delegated the role for Provider enrollment and the Public Authority has its own system, CMIPS II shall accept enrollment data through the Public Authority interface described in Exhibit 6-1 SyRS - Interfaces.

3. CMIPS II shall produce a pre-populated enrollment form for Provider signature upon completion of entry of required enrollment information.
4. CMIPS II shall have an indicator that the enrollment form has been signed by the Individual Provider.
5. CMIPS II shall allow the authorized user to link enrolled Providers to one or more Recipients.
6. CMIPS II shall capture, track, and display voluntary service information for each Individual Provider for each linked Recipient pursuant to MPP 30-763.64.
7. CMIPS II shall not authorize a payment for any voluntary services.
8. CMIPS II shall capture, record, track and display voluntary service information, which shall include, at a minimum, the following:
  - a. Services to be performed
  - b. Date of certification
  - c. Recipient
  - d. County
  - e. Hours per service.
9. CMIPS II shall accept cancellations to voluntary services.
10. Upon cancellation of voluntary services, CMIPS II shall generate a case event, as defined in Paragraph 14.1.1, Case Event Management, notifying the user of a change in Recipient circumstances.
11. Upon cancellation of voluntary services, CMIPS II shall allow the former volunteer to enroll as an Individual Provider pursuant to CDSS All-County Letter No. 00-28.
12. CMIPS II shall provide DHS with Provider demographic information as defined in Exhibit 6-1 SyRS - Interfaces.
13. CMIPS II shall track Medi-Cal excluded, suspended, or Medi-Cal ineligible Provider status, the reason for suspension and the re-instatement date (if any).
14. CMIPS II shall not allow enrollment or authorization of hours for any Medi-Cal excluded, suspended, or Medi-Cal ineligible Provider, pursuant to ACL 97-007.
15. CMIPS II shall provide notification to the user when a Provider that is being Medi-Cal excluded, suspended or becomes Medi-Cal ineligible is working on an active case(s).

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_ NO \_\_\_\_\_

### **13.3 New Employee Registry (NER)**

In 1996, Congress enacted the Personal Responsibility and Work Opportunity Reconciliation Act, requiring all employers to report certain information on newly hired and rehired employees. The Federal requirement was implemented by California effective July 1, 1998. All California employers are required to report all their new or rehired employees who work in California to the New Employee Registry. The registry is used by State and Federal agencies to locate parents nationwide that are delinquent in their child support payments.

**Requirement(s)**

1. Upon initial enrollment and upon termination and reenrollment as an active Individual Provider for each Recipient, CMIPS II shall produce a Report of New Employees (DE 34) tape as defined by the Employment Development Department Information Sheet - Reporting New Employees and Independent Contractors (DE 231Y), and by the Employment Development Department Magnetic Media Reporting Requirements for New Employee Registry Program (DE 340).
2. CMIPS II shall timely and accurately report new employees (Individual Providers) to EDD pursuant to CA UIC 1088.5.
3. CMIPS II shall not produce a DE 34 file if there have been no new hires.
4. CMIPS II shall include both Individual Provider and Recipient information as defined by State regulations on the DE 34 tape.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_ NO \_\_\_\_\_

### **13.4 Provider Maintenance**

The Provider Maintenance function of CMIPS II encompasses the ongoing maintenance processes, and allows the Provider to continue providing PCSP/IPW/IHSS-R and WPCS services to a Recipient. The Provider Maintenance subcomponent includes the Provider Termination function.

#### **13.4.1 Provider Terminations**

Provider Terminations may occur for a variety of reasons, including Provider request, Recipient request, changes in circumstances, changes in Recipient's Medi-Cal eligibility, or denial/change of PCSP/IPW/IHSS-R/WPCS services.

**Requirement(s)**

1. On determination to terminate a Provider, CMIPS II shall allow authorized staff to update the information and mark the case as ready for supervisory review.
2. CMIPS II shall notify the Social Worker Supervisor of the need for review. The Social Worker Supervisor reviews the case record online, indicates necessary changes, or approves the case for Provider Termination.
3. CMIPS II shall notify the Social Worker of required actions.
4. Upon any change in Providers, CMIPS II shall proceed to the Final Determination process to re-determine PCSP, IPW or IHSS Residual service eligibility.
5. CMIPS II shall capture, track, and display Provider Terminations.
6. CMIPS II shall accept the reason for Provider Termination.
7. CMIPS II shall rescind Provider Terminations.
8. If the Provider Termination results in no active Providers for the Recipient, CMIPS II shall generate a case event, as defined in Paragraph 14.1.1, Case Event Management, notifying the user.

9. If the Provider Termination results in no active cases for the Provider, CMIPS II shall update the Provider status to inactive.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **13.4.2 Provider Change of Address**

Provider may submit a Change of Address request on the back of the timesheet. The CMIPS II contractor updates the provider address information prior to further processing of the timesheet. CMIPS II will capture, track and display both a physical address and a mailing address, as applicable for each Provider. However, CMIPS II will only allow one active mailing address and one active physical address.

#### **Requirement(s)**

1. CMIPS II shall allow for a provider's address to be changed by the CMIPS II Contractor when notification of the change is received via the timesheet.
2. CMIPS II shall allow for a provider's address to be changed by an authorized user.
3. CMIPS II shall allow for an effective date for the change of active address.
4. CMIPS II shall generate a case event for all recipients linked to a provider when that provider's address is changed.
5. CMIPS II shall allow for one active mailing address for each provider.
6. CMIPS II shall allow for one active physical address for each provider.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **14 PROGRAM MANAGEMENT**

The PCSP/IPW/IHSS-R Program is administered at the County level by the CWDs and at the State level by the Disability and Adult Programs Division within CDSS. The Program Management function of CMIPS II provides tools for the CWDs and CDSS to manage Program information.

#### **Requirement(s)**

1. CMIPS II shall capture, track, and display all data required for the user to perform the Program Management business functions.
2. CMIPS II shall accept corrections, changes, and deletions to all data as required by the Program Management business functions.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **14.1 County**

The CWDs administer the PCSP/IPW/IHSS-R Program at the local level.

#### **Requirement(s)**

1. CMIPS II shall maintain County names, addresses, phone numbers and contact names.
2. CMIPS II shall enable authorized users multiple levels of access to information within multiple Counties and district offices (e.g., a user that has full access in one county may have read-only access in another county).

3. CMIPS II shall maintain the district office address information for each specific office function.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **14.1.1 Case Event Management**

There are events that occur during a case life cycle (including the referral) that require intervention from the Social Workers, the Social Worker Supervisors and others, including Homemaker Supervisors, and County Contractors. In order to facilitate prompt resolution of these events, a timely and efficient means of identification and reporting is necessary.

##### **Requirement(s)**

1. CMIPS II shall produce an event list for a user for a defined time period, based on their assigned caseload.
2. CMIPS II shall contain a case event list containing all events listed in this SyRS, including but not limited to the following:
  - a. Recipient Events:
    - i) When a referral is received by a data file
    - ii) When a one-time only task has expired
    - iii) When a Provider assignment has been on leave status for thirty (30) consecutive days
    - iv) Upon request for homemaker mode of service
    - v) When Paramedical Services authorization has expired
    - vi) When Physician's Evaluation has expired
    - vii) For reassessment dates
    - viii) When the Recipient has multiple Providers, for validation of prorated hours
    - ix) Upon the Recipient's physical address change
    - x) When the Recipient's address matches one of the Recipient's Provider's addresses
    - xi) Upon Recipient's birth date changes
    - xii) When the Recipient turns eighteen (18)
    - xiii) When the Recipient's Child turns fourteen (14)
    - xiv) Upon notification of death
    - xv) Upon recognition of an invalid SSN.
  - b. Payroll Events:
    - i) When an advance pay timesheet has not been received within the time frame defined by MPP 30-767.133(b)
    - ii) When an EFT record is left on hold for a system configured period of time
    - iii) When a timesheet is entered for a Provider with an active Workers' Compensation claim
    - iv) When a wage rate change results in the Share of Cost exceeding the cost of PCSP/IPW/IHSS-R services.
  - c. Provider Events:

- i) Upon receipt of a Provider SSN error from DHS
    - ii) When the Provider is determined to be a minor child and turns eighteen (18)
    - iii) When the Provider has been on leave status for thirty (30) consecutive days
    - iv) When the Provider enrollment status change.
  - d. Program Management:
    - i) Upon receipt of County Contractor payroll data.
  - 3. The number and type of case events can be changed or modified throughout the life of the system. CMIPS II shall have flexibility to modify the events and distribution of the events included in the list as needed.
  - 4. CMIPS II shall display the event list.
  - 5. CMIPS II shall allow the user to optionally print the list or download the list to a file.
- Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **14.1.2 Case Authorization Management**

CMIPS II facilitates effective monitoring of Social Worker activities and efficient authorization methods for Social Worker case activities including, but not limited to, approval and denials for PCSP/IPW/IHSS-R services. CMIPS II provides the Social Worker Supervisor (SWS) with a list of those case activities requiring supervisory review.

##### **Requirement(s)**

- 1. CMIPS II shall display a pending authorization list for a specified user, for a selected time period, which includes his/her entire assigned caseload. This list shall contain pending authorizations for activities including, but not limited to, the following:
  - a. Recipient reassessment
  - b. Recipient status changes
  - c. Request for inter-county transfer.
- 2. CMIPS II shall provide an electronic approval mechanism for the user to review and approve the specific case activity.
- 3. CMIPS II shall accommodate multiple levels of approvals, i.e., Social Worker Supervisor approval required prior to Payroll Manager review and approval.
- 4. CMIPS II shall provide the user the ability to reject the request and notify the initiator of the request of the rejection and the reason for the rejection.
- 5. CMIPS II shall allow a qualified user to withdraw or cancel a request for action initiated before the approval is recorded/updated.
- 6. CMIPS II shall restrict users from approving/disapproving their own requests.
- 7. CMIPS II shall allow for the temporary reassignment of the authorization role to accommodate absence of the permanent assignee (i.e., illness, vacation, etc.).

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **14.1.3 Caseload Reassignment**

Whenever the CWD has a change in Social Workers, district offices, or caseload assignments, County supervisors or managers reassign cases in the system.



**Requirement(s)**

1. CMIPS II shall maintain caseloads by Social Worker, district office, and County.
2. CMIPS II shall accept caseload reassignment individually or in groups.
3. CMIPS II shall provide automated assistance for caseworker assignment.
4. CMIPS II shall accept caseload assignment and reassignment for an individual case or an entire caseload.
5. CMIPS II shall accept case reassignment between Social Workers and district offices.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **14.2 Quality Assurance**

The CDSS Quality Assurance Unit performs reviews of statewide case information to ensure caseworkers appropriately apply PCSP, IHSS Plus Waiver, and IHSS Residual rules and policies.

The County Quality Assurance Units perform reviews of countywide case information and conduct reviews within their respective Counties. County Quality Assurance staff obtain a random sampling of PCSP/IPW/IHSS-R cases. County Quality Assurance staff review each case, conduct interviews with County staff, review reports, and compare County aggregate data to statewide data. County Quality Assurance Staff may visit each reviewed Recipient in his/her home and complete a needs assessment.

The CDSS Quality Assurance Unit evaluates County Quality Assurance activities.

**Requirement(s)**

1. CMIPS II shall calculate, print and store needs assessment data for Quality Assurance purposes without calculations being stored as part of individual case records.
2. CMIPS II shall extract random case record samplings for an individual County for purposes of County Quality Assurance evaluations.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **14.3 Accountability and Tracking**

CMIPS II supports verification that payments and deductions are processed correctly. CMIPS II accommodates audits by tracking all payments, deductions, and disbursements at both detail and summary levels.

**Requirement(s)**

1. CMIPS II shall support the State in operating the program according to the Generally Accepted Accounting Principles (GAAP) as defined by the Financial Accounting Standards Board.
2. CMIPS II shall support an external accounting audit.
3. CMIPS II shall validate and track payments to all external payees, e.g., labor organizations, back to individual withholding amounts.
4. CMIPS II shall reconcile payments and deductions.

5. CMIPS II shall setup and maintain accounts and entities for deduction and payment support.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **14.3.1 General Ledger**

In order for the system to support CDSS in operating in accordance with GAAP, general ledger functionality as described below is required.

#### **Requirement(s)**

1. CMIPS II shall maintain general ledger accounts at the State, Program, and County levels.
2. CMIPS II shall track and account for the movement of funds between accounts.
3. CMIPS II shall process and report overpayment recovery transactions and credit the County's allocation after the funds are withheld.
4. When the collection is satisfied or closed, CMIPS II shall reallocate the collected funds to the County as a recovery adjustment.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **14.3.2 Funding Source Management**

The funding source for each of the four (4) Programs: PCSP, IPW, IHSS Residual and WPCS, is determined by a cost allocation among Federal, State, and County levels of participation.

The Adult Programs Fiscal and Administrative Unit maintains the percentage for level of participation among funding sources (Federal, State, and County). The funding sources percentages for level of participation can change. When applicable, CDSS staff adjust the Counties' allocation of State funds for PCSP/IPW/IHSS-R services. These changes can include adjustments to the initial allocation, supplemental allocation, and funds advanced.

#### **Requirement(s)**

1. CMIPS II shall track and manage funding source allocations as defined by W&IC §12306, 12306.1, 12306.2, and 12306.21.
2. CMIPS II shall track and manage funding source allocations to allow for tracking and reporting on multiple sub-sources (i.e., the IPW funding source will need 6 sub-sources).
3. CMIPS II shall calculate and report paid hours by Program funding source, including sub-source, level of participation: Federal, State, County, and by individual County or statewide, based on pre-approved and predefined percentages.
  - a. Funding Source historical data shall be maintained for reporting purposes.
  - b. CDSS or the Contractor after State approval shall update funding percentages as required by Federal, State, or County mandates.
4. CMIPS II shall maintain funding source participation levels by County and by source.
5. CMIPS II shall contain sufficient data capture and reporting capabilities to support the State and County funding management process, pursuant to CDSS MPP 30-766.
6. CMIPS II shall make retroactive allocation percentage changes to funding sources. In the event of a retroactive adjustment, CMIPS II shall recalculate the funding source accounts.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **14.3.3 Funding Management**

Funding for payment of Provider services is currently divided between four (4) Programs: PCSP, IPW, IHSS Residual and WPCS. Funding is determined by criteria that include the level of impairment, the PCSP/IPW/IHSS-R and WPCS services authorized, and the relationship of the Provider to the Recipient. CMIPS II determines the funding based on the identified criteria. CMIPS II tracks and reports payroll expenditures by funding (i.e., currently PCSP, IPW, IHSS Residual or WPCS) source.

#### **Requirement(s)**

1. CMIPS II shall track and report on paid and authorized hours by Program Fund (i.e., currently PCSP, IWP, IHSS Residual and WPCS) and by individual County or statewide.
2. CMIPS II shall associate every payment with the correct funding by type of pay and appropriate fiscal year.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **14.3.3.1 County Contractor Pay**

The contract agencies bill the County for hours worked for each PCSP/IPW/IHSS-R Recipient. The County Contractor sends an electronic file to the Contractor. The Contractor, utilizing the electronic file, updates CMIPS II for all PCSP/IPW/IHSS-R services provided. On receipt of the file, CMIPS II notifies the appropriate CWD that the billing information is ready for review. The CWD reviews the billing, resolves any rejected payroll records, and indicates approval for payment. CMIPS II generates a check request and appropriate reports for the County auditor. The County auditor issues payment to the County Contractor and sends the payment information to the CWD. CWD staff enter the payment information in CMIPS II.

#### **Requirement(s)**

1. CMIPS II shall accept payroll data from County Contractors as defined in Exhibit 6-1 SyRS - Interfaces.
2. Upon receipt of County Contractor payroll data, CMIPS II shall produce a case event as defined in Paragraph 14.1.1, Case Event Management.
3. CMIPS II shall validate the County Contractor payroll records and raise exceptions for any erroneous records including, but not limited to, the following:
  - a. Recipient not found
  - b. Recipient not on County Contractor mode of service
  - c. Reported hours in excess of authorized hours
  - d. Recipient not authorized to receive PCSP/IPW/IHSS-R services.
4. CMIPS II shall track exception records and display when the records have been corrected and resubmitted by the County Contractor.
5. CMIPS II shall accept adjustments to County Contractor invoices prior to a warrant being generated.
6. CMIPS II shall produce a printed request for payment for the County auditor/controller of approved payroll records.
7. CMIPS II shall reconcile the reported and paid information for each Recipient.

8. CMIPS II shall provide the County Contractor with reconciled and erred payment information as defined in Paragraph 18, Interfaces.
9. Upon a County Contractor rate change, CMIPS II shall retroactively calculate adjustments for contract cases where the invoice has already been submitted for the pay period.
10. CMIPS II shall process County Contractor rate adjustments with the subsequent invoice for the County Contractor.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **14.3.3.2 County Homemaker Pay**

Because Homemaker Providers are County employees, the actual generation of payroll warrants for Homemakers is a County function. However, CMIPS II provides assistance to the State and Counties in the reconciliation process of hours worked by and hours paid to the Homemaker for providing PCSP/IPW/IHSS-R services. The Homemaker provides PCSP/IPW/IHSS-R services to the Recipient and enters in CMIPS II days worked and hours worked for each assigned Recipient. On completion of entry, CMIPS II sends a notification to the Homemaker Supervisor who reviews the time entry. On supervisory approval of the time entry, CMIPS II produces a summary report for each Homemaker to be used for County, State and Federal funding reconciliation.

##### **Requirement(s)**

1. CMIPS II shall capture, track, and display Homemaker service hours worked separately from Arrears and Advanced Pay Payroll for Recipients who have selected the Homemaker Provider Mode of service.
2. CMIPS II shall generate a case event as defined in Paragraph 14.1.1, Case Event Management, for the Homemaker Supervisor when Homemaker time entries are ready to review.
3. CMIPS II shall validate that the total Homemaker hours entered do not exceed the Recipient's authorized hours for the Homemaker Mode of Service.
4. CMIPS II shall report the total Homemaker hours worked per Recipient, per County, per month to assist Counties and CDSS in the funding reconciliation process.
5. CMIPS II shall produce a summary report for each Homemaker to be used for County, State and Federal funding reconciliation.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

#### **14.4 Activity Tracking**

The PCSP/IPW/IHSS-R Program is required to perform certain activities or actions within specified timeframes.

##### **Requirement(s)**

1. CMIPS II shall track the date on which specified actions occur to allow effective monitoring and management of Program compliance.
2. The actions to be tracked shall include the following:
  - a. The date of application

- b. The date of Approval or Denial
- c. The date of printing for mailing a Notice of Action, which shall be at least ten (10) days prior to the action going into effect
- d. The date on which initial PCSP/IPW/IHSS-R services were provided to the Recipient
- e. The date of completion of a needs assessment
- f. The date of Provider enrollment status
- g. The dates of initiation and completion of an inter-county transfer
- h. The dates of receipt and acknowledgement of a written complaint
- i. The date of completion of the internal complaint review
- j. The date on which a timesheet is entered in the system.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_ NO \_\_\_\_\_

## **15 FRAUD PREVENTION**

As part of the goal to prevent fraud within programs administered by CDSS, CMIPS II provides deterrence, detection, and reporting of possible fraudulent activities. An employee, a Recipient, or a Provider could conduct possible fraudulent activities that may initiate an investigation. Some of the indicators may include inconsistent timesheet signatures, a Recipient or a Provider with active cases in multiple Counties, inconsistencies between medical reports and the Recipient's needs, residency, a recipient authorized for PCSP/IPW/IHSS-R services while absent from their home, an Individual Provider subcontracting PCSP/IPW/IHSS-R services, a Provider submitting a timesheet for a deceased Recipient, or overpayments based on inaccurate eligibility information.

### **Requirement(s)**

- 1. CMIPS II shall provide deterrence, detection, and reporting of possible fraudulent activities.
- 2. CMIPS II shall accept corrections, changes, and deletions to all data in records, as required by the Fraud Prevention business functions.
- 3. CMIPS II shall capture, track, and report on multiple reports of forged warrants from the same Provider and/or Recipient.
- 4. CMIPS II shall track and report on multiple address changes for the same Provider and/or Recipient.
- 5. CMIPS II shall provide a comprehensive statistical profile of utilization patterns by Providers and Recipients in various categories of PCSP/IPW/IHSS-R services authorized.
- 6. CMIPS II shall provide information, which reveals and facilitates investigation of potential defects in the level of care provided.
- 7. CMIPS II shall support Fraud Investigators research.
- 8. CMIPS II shall have interfaces through DHS to provide matching of recipients for potential duplication of PCSP/IPW/IHSS-R services with other services; including but not limited to Long Term Care, Adult Day Care Services, and In-Patient Services.

9. CMIPS II shall accept, via an interface, a file from DHS containing other Medi-Cal services that IHSS recipients receive to provide matching for Quality Assurance and fraud prevention reporting.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

### **15.1 Income Eligibility Verification System (IEVS) Wage Match**

The CMIPS II system creates and sends a monthly file to the IEVS at DHS of Provider wage payments for use in fraud investigations.

#### **Requirement(s)**

1. CMIPS II shall produce an IEVS Wage Match file.
2. CMIPS II shall aggregate wages for each Provider and report all wages as a single record for all Recipients.
3. The system Wage match file shall include the following Provider information:
  - a. SSN
  - b. Name
  - c. Date Of Birth
  - d. Gender
  - e. Gross Monthly Earnings by paid date.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **16 FORMS**

CDSS coordinates the maintenance of all PCSP/IPW/IHSS-R forms supported by the system to ensure consistent data sets and data computations. A sample of the current forms available to PCSP/IPW/IHSS-R can be found in the Artifact 3 - Data Entry Forms, located in the Bidder's Library.

A listing of recommended new forms for CMIPS II is located in Artifact 5 - Recommended Forms, located in the Bidder's Library. The forms and information identified in Artifact 5 are provided only to assist the Contractor in proposing and developing a forms strategy. During requirements validation, all of the recommended forms and information need to be verified and additional forms may be identified. All of the information provided is for informational purposes only and does not contain any system or Contractor requirements.

#### **Requirement(s)**

1. CMIPS II shall produce all State identified or recommended forms.
2. CMIPS II shall generate additional forms as identified by the Change Management Process defined in Section 6, SOW, Paragraph 3.2.5, Change Management.
3. CMIPS II shall generate and print user selected forms with available case data pre-populated by the system.
4. CMIPS II shall accept an online user request to print and/or reprint any supported form at a user-designated location that is supported by the system.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_



## **16.1 Daily Printing Process**

PCSP/IPW/IHSS-R support staff access CMIPS II daily to print jobs and distribute documents from the previous day's entries. This process remains available as well as an on-demand printing ability for screen prints or small reports.

### **Requirement(s)**

1. CMIPS II shall generate and print on-demand, user-selected small reports such as those required to support daily work activities, to a user-selected printer.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **16.2 Case Forms Generation**

Prior to the Needs Assessment, the Social Worker reviews the case file and determines what forms are required.

### **Requirement(s)**

1. CMIPS II shall allow for the Social Worker to request prints of all required case forms from the system.
2. Based on intake and eligibility data collected, CMIPS II shall generate a list of forms required for the Needs Assessment.
3. CMIPS II shall allow the user to select system-supported, mandated State and generic forms for printing.
4. CMIPS II shall require the user to select from the following packages of forms for the needs assessment process for a Recipient:
  - a. All mandatory Needs Assessment forms
  - b. All mandatory and optional Needs Assessment forms
  - c. All mandatory Provider Enrollment forms
  - d. Individually select from all Needs Assessment forms.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **16.3 Notice of Action (NOA)**

The Counties notify the Recipient of the number of authorized hours in each of the service categories. When the information changes, CMIPS II notifies the Recipient of the change via a Notice of Action (NOA). NOAs are sent at least 10 days prior to the effective date of the action. A comprehensive list of current NOAs can be found in the CMIPS User Manual located in the Bidder's Library.

### **Requirement(s)**

1. CMIPS II shall produce NOAs.
2. CMIPS II shall both batch print and immediately print the NOA.
3. CMIPS II shall track the date each NOA was generated pursuant to MPP 30-759.2.
4. CMIPS II shall produce all applicable NOAs pursuant to MPP 30-759.7 and W&IC §12300.2.

5. CMIPS II shall produce NOAs for the following reasons including but not limited to:
  - a. Provisional Approval
  - b. Approval, Status Eligible
  - c. Denial
  - d. Reassessment with no change
  - e. Reassessment with changes
  - f. Leave
  - g. Termination
  - h. Time Limited Approval
  - i. Overpayments, pursuant to MPP 30-768.33
  - j. Underpayments, pursuant to MPP 30-768.44
  - k. Appeals hearings
  - l. User Request
  - m. Additional business needs
  - n. Direct Deposit request processed.
6. All NOAs shall contain the following:
  - a. All information required by MPP 30-763.81
  - b. Header sentences specific to the type of action
  - c. System-generated messages
  - d. Additional user selected messages.
7. The overpayment NOA shall include, at a minimum, all information defined by MPP 30-768.341, 30-768.342, and 30-768.344.
8. The underpayment NOA shall include, at a minimum, all information defined by MPP 30-768.441, 30-768.442, 30-768.443, and 30-768.444.
9. CMIPS II shall support NOAs printed in alternate languages as defined in Paragraph 7.8.1, Language Support.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **16.4 Timesheets**

### **Requirement(s)**

1. Timesheets, when separated from the warrant and earnings statement, shall be of the correct size to insert into standard mailing envelopes with dimensions of 4 1/8" X 9 1/2" without folding.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **17 REPORTS**

### **Requirement(s)**

1. The Management Information component of CMIPS II shall produce the equivalent to all mandatory reports as defined in Artifact 6 - Reports, located in the Bidder's Library.

2. The Management Information component of the CMIPS II system shall support CDSS and CWDs in managing and controlling the PCSP/IPW/IHSS-R Program and in promoting effective Program administration.
3. The Management Information component shall provide information for CDSS to monitor and evaluate County performance and the uniformity of assessments, as well as provide case documentation in terms of demographic characteristics, permanent file data, and a permanent audit trail. Additionally, the Management Information component shall provide CDSS with statewide assessment data to pursue service standards, monitor and control Program activities and expenditures, estimate the impact of Program changes, identify problem areas among Counties, and accurately develop the PCSP/IPW/IHSS-R Program budget.
4. The Management Information component shall also provide management information that includes fiscal and statistical data on a case-by-case, worker-by-worker, office-by-office, County-by-County and statewide basis. This statistical data is reported for the total Program and is also sorted by PCSP, IPW, Residual, and WPCS funding. In some cases, CDSS shall be provided with a summary form of the total Program reports.
5. Detailed County-specific program reports shall be provided to Counties containing their respective data to help them monitor and control the uniformity of assessments, as well as identify problem areas.
6. CMIPS II shall support ad hoc reporting requests from Counties and other outside entities after the request is approved by CDSS. CMIPS II shall support the addition of new reports. CDSS coordinates all ad hoc report requests in such a manner as to identify new routine reports needed and facilitate future requests for "like" reports.
7. CMIPS II shall capture and track all data required for the system to produce all mandatory reports.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **18 INTERFACES**

### **Requirement(s)**

1. CMIPS II shall interface with County, State, Federal, and external agencies as identified in Table 1. Interface Categories.
2. To provide effective communication in case management, eligibility, payroll, and accounting as described in Table 1, Interface Categories, CMIPS II shall support the data exchange for the specific interfaces, the interface partners and exchange frequencies detailed in Exhibit 6-1 SyRS - Interfaces.

**Table 1. Interface Categories**

<b>INTERFACE AREA</b>	<b>DESCRIPTION</b>
Accounting	Interfaces with external State agencies for the purpose of Medi-Cal claims accounting and Federal reporting
Case Management	Interfaces with other State agencies to coordinate client case management
County Contractor	Interfaces between County Contractor providing PCSP/IPW/IHSS-R services and CMIPS II to provide payroll reconciliation

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**Case Management, Information and Payrolling System (CMIPS II)**  
**Section 6 – Technical Requirements - System Requirements Specification (SyRS)**

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Eligibility	Interfaces with the State Automated Welfare Systems (SAWS) to determine income eligibility for potential and existing clients
Payroll	Interfaces from and to CMIPS II to coordinate and communicate payroll data to allow effective management of Provider payroll
Tax	Interfaces with State and Federal agencies to provide information on Provider wage and tax withholdings and Recipient tax contributions
Withholding	Interfaces to CMIPS II with information to withhold payroll deductions from Provider wages

3. In addition to the partners supported by the previous system, CMIPS II shall be required to have new additional interfaces with additional agencies, including but not limited to the following:
  - a. Public Authorities
  - b. Labor Organizations
  - c. State Compensation Insurance Fund.
4. CMIPS II shall capture and track all data required for the system to produce all mandatory interfaces.
5. CMIPS II shall support security and data standards of interface partners.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_

## **19 INFORMATION GROUPINGS**

A listing of system information needed by the user for the business functions is located in Artifact 7 - Information Groupings, located in the Bidder's Library.

### **Requirement(s)**

1. CMIPS II shall maintain all data elements required to support the business requirements.
2. The system design shall allow for the addition of new data elements, as required to support new legislative and/or regulatory reporting needs.

Bidder agrees to the above requirement(s)? YES \_\_\_\_\_NO \_\_\_\_\_